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2021 DEC 10 PH 12: 09
SECRETARY OF STATE

T. BURCH DEC 13 2021

COVER LETTER

SUBJECT: PA Global Consultants LLC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Prince 305 eph Abdyllah Name of Person
PA Global Consultants, LLC Firm/Company
1317 Edgewater Dr, #3224 Address
Addiess
Orlando, FL 32804
City/State and Zip Code
Prince . J. Abd nlkh @ PACIO be 1 Consultants . Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
343-4363
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing Address Street Address
New Filing Section New Filing Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabilit	y Company is:		
(Must conta	Global Consulain the words "Limited Liability Con	Hants, LLC npany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	ddress of the principal office of the L	imited Liability Company is	i:
<u>Princip</u> :	al Office Address:	Mailing Address:	
1317 Ed #3724 Oclando	gewater Drive	1317 Edge # 3224 orlando,	Water Drive FI 52804
(The Limited Liability Company another business entity with an a	ent, Registered Office, & Registere cannot serve as its own Registered A active Florida registration.) address of the registered agent are:		n individual or SECRLT
	Randy Milliken		ASS ASS
	Name		
	1317 Edgewater Dr		
	Florida street address (P.O. Box	NOT acceptable)	EDPM 12: 09
	Orlando, FL 32804		- A
	City State	Zip	
place designated in this certificate, further agree to comply with the pr	agent and to accept service of process I hereby accept the appointment as revisions of all statutes relating to the oligations of my position as registered Randy Warn's	egistered agent and agree to proper and complete perfort	act in this capacity. I nance of my duties, and I
	registered rigent s	organic (NEQ OTTED)	

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager	
"MGR" = Manager	
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	Trince J. MUCHION
	131+ Eage Water Dive
	Orlando, F1 31804
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(Use attachment if necessary)	φ Ag
ective date is listed, the date must be speci of filing.)	filling: 61/01/2022 (OPTIONAL) ific and cannot be more than five business days prior to or 90 date the applicable statutory filing requirements, this date will not be State's records.
	
REOUIRED SIGNATURE:	
	ber or an authorized representative of a member.
Signature of a mem This document is executed	Der or an authorized representative of a member. I in accordance with section 605.0203 (1) (b), Florida Statutes.
Signature of a mem This document is executed I am aware that any false in	

as

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)