3/7/22, 3:52 PM

12200000945E

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000086406 3)))



H220000864063ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| imail Address: |
|----------------|
| |

FLORIDA LIMITED LIABILITY CO. **BUSSINES GLOBAL METAL BGM LLC**

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | | |
|--|--------------------|--|
| BUSSINES GLOBAL METAL BGM LLC | | |
| (Must contain the words "Limited Liabili | ty Company, "L.I | L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the principal office o | f the Limited Lia | bility Company is: |
| Principal Office Address: | | Mailing Address: |
| 7901 4th St N STE 300 | 7901_4 | th St N STE 300 |
| St. Petersburg FL 33702 | St. Pe | tersburg FL 33702 |
| ARTICLE III - Registered Agent, Registered Office, & Reg (The Limited Liability Company cannot serve as its own Regist another business entity with an active Florida registration.) | | |
| The name and the Florida street address of the registered agent | are: | |
| Northwest Registered Agen | t, LLC | |
| Nam | | |
| 7901 4th ST N STE 300 | | |
| Florida street address (P.O. | Box NOT accep | otable) |
| St. Petersburg, FL 33702 | | |
| City | State | Zip |
| Having been named as registered agent and to accept service of p | rocess for the abo | ove stated limited liability company at th |

place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

| Title: "AMBR" = Authorized Member | Name and Address: |
|--|--|
| "MGR" = Manager AMBR | PEDRO SALDARRIAGA BARBERAN 7901 4th St N STE 300 |
| AMBR | St. Petersburg FL 33702 YETSILETH PERDOMO VELASQUEZ 7901 4th St N STE 300 |
| | 7901 4th St N STE 300 St. Petersburg FL 33702 |
| | |
| | |
| (Use attachment if necessary) | |
| If an effective date is listed, the date must be spec he date of filing.) | of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 days after eet the applicable statutory filing requirements, this date will not be listed as of State's records. |
| ARTICLE VI: Other provisions, if any. | N3 |
| | [22] HAR |
| REQUIRED SIGNATURE: | |
| This document is execute I am aware that any false | mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes information submitted in a document to the Department of State felony as provided for in s.817.155, F.S. |
| Morgan Nobi | 1- |

The name and address of each person authorized to manage and control the Limited Liability Company:

Filing Fees:

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

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)