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.

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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 🖼 annual report mailings. Enter only one email address please.

Email Address:

## FLORIDA LIMITED LIABILITY CO. KORE FUNDING LLC

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KORE FUNDING L	LC					
(Must cont	ain the words "Limited	Liability Company,	"L.L.C" or "LLC.")			
ARTICLE II - Address:						
The mailing address and street a	ddress of the principal o	office of the Limited	Liability Company is:			
Princip	al Office Address:		Mailing Address:			
9531 W Mcnab Rd		9531	W Mcnab Rd			
Tamarac FL 33321		Tam	arac FL 33321			
				<u>-</u>		
The Limited Liability Company	y cannot serve as its own	Registered Agent.	nt's Signature: You must designate an individual o	or		
The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registration	Registered Agent. 'on.)		TALL SEC	7827	
The Limited Liability Company mother business entity with an	y cannot serve as its own active Florida registration	Registered Agent. on.) d agent are:		SEC	2822 HAY	
The Limited Liability Company mother business entity with an	y cannot serve as its own active Florida registration address of the registered	Registered Agent. on.) d agent are:		SECRET	3927 HAY 26	
The Limited Liability Company mother business entity with an	y cannot serve as its own active Florida registration address of the registered	Registered Agent. on.) d agent are: nc. Name		SECRETARY O	26	· · · · · · · · · · · · · · · · · · ·
The Limited Liability Company mother business entity with an	y cannot serve as its own active Florida registration address of the registered Registered Agents In	Registered Agent. on.) d agent are: ac. Name	You must designate an individual o	SECRETARY OF	26 AM	
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an The name and the Florida street	y cannot serve as its own active Florida registration address of the registered Registered Agents In 7901 4th St N STE 3	Registered Agent. on.) d agent are: ac. Name	You must designate an individual o	SECRETARY OF STATE TALLAHASSEE, FLOR	26	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the 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)

(CONTINUED)

"AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager  MGR	JUAN MORENO 7901 4th St N STE 300 St. Petersburg FL 33702	
	SECRETAR FALL AHASS	2022 MAY 26
	EE CO	AM 9:
(Use attachment if necessary)	Ö K	32
CLE V: Effective date, if other than the effective date is listed, the date must te of filing.)	the date of filing: (OPTIONAL)  It be specific and cannot be more than five business days prior to or 90 destroys not meet the applicable statutory filing requirements, this date will not be the state of State's records.	lays af
CLE V: Effective date, if other than the effective date is listed, the date must te of filing.)  If the date inserted in this block does become a seffective date on the Department's effective date on the Department.	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be the timent of State's records.	lays af
CLE V: Effective date, if other than the effective date is listed, the date must te of filing.)  If the date inserted in this block does becoment's effective date on the Departure of the Depart	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be timent of State's records.	lays af
CLE V: Effective date, if other than the effective date is listed, the date must te of filing.)  If the date inserted in this block does becoment's effective date on the Depart CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is I am aware that an	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be the timent of State's records.	lays af

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)