

# L22-000229838

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : CAPITOL SERVICES, INC.  
Account Number : I20160000017  
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CORPORATIONS  
COMMERCIAL  
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**FLORIDA LIMITED LIABILITY CO.  
SCMG PARSONS, LLC**

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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**ARTICLES OF ORGANIZATION  
OF  
SCMG PARSONS, LLC**

1. Name. The name of this limited liability company is **SCMG Parsons, LLC** (the "Company"), and it shall be formed as a limited liability company under Chapter 605 of the laws of the State of Florida.

2. Duration. The Company's existence shall be effective as of May 20, 2022 and shall thereafter be perpetual.

3. Purpose. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.

4. Place of Principal Office. The mailing and street address of the Company's principal office is 4522 W. Village Drive, Suite 202, Tampa, Florida 33624.

5. Registered Agent and Office. The name of the initial registered agent of the Company is Alejandro Gonzalez. The street address of the initial registered agent of the Company is 4522 W. Village Drive, Suite 202, Tampa, Florida 33624.

6. Management of the Company. The Company shall be manager-managed and, therefore, the management of the Company shall be vested in the Managers of the Company. The initial Manager of the Company shall be Alejandro Gonzalez.

7. Operating Agreement. The members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned executed these Articles of Organization on the 26<sup>th</sup> day of May, 2022.

This document is executed in accordance with Section 605.0203(1)(b), *Florida Statutes*. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony provided for in Section 817.155, *Florida Statutes*.

  
\_\_\_\_\_  
ALEJANDRO GONZALEZ  
Authorized Representative of Member

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**ACCEPTANCE BY REGISTERED AGENT**

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, *Florida Statutes*.

  
\_\_\_\_\_  
ALEJANDRO GONZALEZ

Dated: May 26, 2022

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OFFICE OF CLERK