

L22000365442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/27/22--01021--022 **160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 JUN 10 PM 5:24

FILED

file 6/10/22

L
W22-68021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2022 JUN 10 AM 8:51

CORPORATIONS
COMMERCIAL
SERVICES

May 23, 2022

MURAT ODIGE
6250 SW 20 STREET
NORTH LAUDERDALE, FL 33068

SUBJECT: GLOBAL FINALITY LLC
Ref. Number: W22000068021

We have received your document for GLOBAL FINALITY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 422A00011748

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: GLOBAL FINALITY LLC
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:

MURAT ODIGE

Name of Person

Firm/Company

6250 SW 20 STREET

Address

NORTH LAUDERDALE, FL 33068

City/State and Zip Code

global.finalityllc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MURAT ODIGE

954

5735211

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GLOBAL FINALITY LLC

(Must contain the words "Limited Liability Company, "L.L.C." or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

6250 SW 20 STREET
NORTH LAUDERDALE, FL 33068

6250 SW 20 STREET
NORTH LAUDERDALE, FL 33068

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MURAT ODIGE

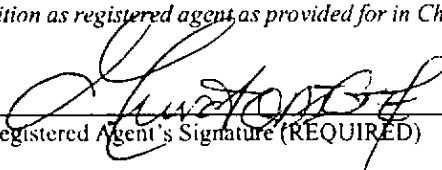
Name

6250 SW 20 STREET

Florida street address (P.O. Box **NOT** acceptable)

<u>NORTH LAUDERDALI</u>	<u>FLORIDA</u>	<u>33068</u>
City	State	Zip

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)

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2022 JUN 10 PM 5:25
SHARON L. STANTON
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

Murat ODIGE, Mgr

6250 SW 20 STREET
NORTH LAUDERDALE, FL 33068

Agardith ODIGE, Ambr

6250 SW 20 STREET
NORTH LAUDERDALE, FL 33068

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

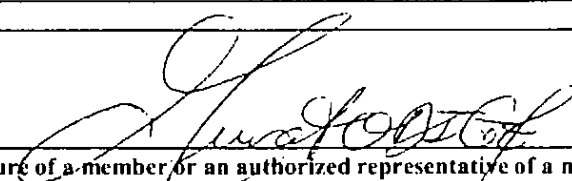
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

This company can operate (or be a member of another LLC) in different fields like housing , bakery and printing shop etc..

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

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 as provided for in s.817.155, F.S.

MURAT ODIGE

Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

2022 JUN 10 PM 5:25
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

Attached

Article VII : The death, removal or resignation of any member of **GLOBAL FINALITY LLC** will not result to its dissolution.

Article VIII : The dissolution could be made with the agreement of 2/3 of total members.

Article IX : The beginning and additional Funds of **GLOBAL FINALITY LLC** will be funding by all investments (beginning and additional) from all members and the profit it will generate.

A handwritten signature in black ink, appearing to be 'H.O.' or similar, written in a cursive style.

FILED

2022 JUN 10 PM 5:25

CLERK, OFFICE OF STATE
TALLAHASSEE, FL 32310