

Division of Corporations  
 Florida Department of State  
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 Electronic Filing Cover Sheet

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To:

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

From:

Account Name : JFS CONSULTING SERVICES LLC  
 Account Number : I20220000092  
 Phone : (786)440-5553  
 Fax Number : (786)279-5272

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
 TIGER GLOBAL SOLUTION LLC**

Certificate of Status	0
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**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**Article I**

The name of the Limited Liability Company is:

TIGER GLOBAL SOLUTION LLC

**Article II**

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

501 N. Riverside Dr. Apt 902  
Pompano Beach, FL. 33062

The mailing address of the Limited Liability Company is:

501 N. Riverside Dr. Apt 902  
Pompano Beach, FL. 33062

**Article III**

Other provisions, if any:

ANY AND ALL LAWFUL BUSINESS

**Article IV**

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

JFS CONSULTING SERVICES LLC  
2627 NE 203RD ST  
SUITE 218  
AVENTURA, FL. 33180

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.

Registered Agent Signature: JORGE SCHNEIDER

## **Article V**

The name and address of person(s) authorized to manage LLC:

Title: MGRM  
GABRIELA GOMEZ  
501 N. Riverside Dr. Apt 902  
Pompano Beach, FL. 33062

## **Article VI**

The effective date for this Limited Liability Company shall be:

01/09/2023

Signature of member or an authorized representative

Electronic Signature: GABRIELA GOMEZ

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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