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(Re	questor's Name)	<u> </u>
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE: 900941 7837538
AUTHORIZATION :
COST LIMIT: \$ 1250 DOREMAN
ORDER DATE : July 25, 2023
ORDER TIME : 2:59 PM
ORDER NO. : 900941-005
CUSTOMER NO: 7837538
DOMESTIC FILING
NAME: IXORA CONSULTING LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker - EXT.
EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR IXORA CONSULTING LLC

The undersigned, being an authorized person to execute these Articles of Organization,
hereby certifies as follows:
ARTICLE 1 – Name:
The name of the limited liability company is:
lxora Consulting LLC
ARTICLE II – Address:
The mailing address and street address of the principal office of the limited liability company is
40 Ixora Way Ocean Ridge, Florida 33435
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Corporation Service Company Name
Florida street address (P.O. Box NOT acceptable)

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 608, F.S.

Tallahassee, Florida 32301 City, State, and Zip

Corporation Service Company

Cyluma Butter

By: Assistent Vice Provident

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.)



The limited liability company is to be managed by one manager or more managers and is, therefore, a manager – managed company.

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).

RALPH SERPE

Typed or printed name of signee