epartment of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

**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.

MG Group Of Companies LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

To: 18506176381 From: 14693173436 Date: 08/25/23 Time: 5:16 PM Page: 02/03 (((H23000296196 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is

MG Group Of Companies LLC

(Must contain the words "Limited Eability 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:
Mohallah Faroogabad	Mohallah Farooqabad
Ahmadpur Sial.Punjab, 50390, PK	Ahmadpur Sial, Punjab, 50390, PK

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

	Name	
476 Riverside Ave	_	_
Florida street addre	58 (P ○ Box <u>NOT</u> ac	cceptable)
Jacksonville	FI.	32202
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. Thereby 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 - Signature (REF) URED)

(CONTINUED)



To: 18506176381 From: 14693173436 Date: 08/25/23 Time: 5:16 PM Page: 03/03

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The name and address of each person authorized to manage and control the Einited Liability Company.

IGR" = Manager AMBR	Muhammad Muzammil Hussain Mohailah Faroogabad
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