Division of Corporations **Electronic Filing Cover Sheet**

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(((H24000128464 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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. **TCG Mgmt Services LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

H24000128464 3

COVER LETTER

TO:	New Filing Sec Division of Co					
SURJE	TCG Mgm	nt Services LLC				
		Name o	fLim	ited Liabil	ty Company	
The cas	closed Articles of	Organization and fee(s) arc	submitted	for filing.	
Please	return all corresp	ondence concerning th	is ma	tter to the f	ollowing:	
	Benjamin W	/alkov				
				Name of	Person	
	Caldera Lav	v PLLC				
				Firm/Co	трапу	
	7293 NW 2	nd Avenue				
				Addr	css	_
	Miami, FL	33150				
			Ci	ity/State an	d Zip Code	······································
	ben@caldera	law E-mail address: (to be		C E-+	1	
					плим героп поппсат	ion)
For furth	er information co	incerning this matter, p	lcase	call:		
	Jesse Potterv		78 11 (6	321-3811)	
	Nem	ie of Person		ea Code	Daytime Telephon	ic Number
Enclose	ed is a check for t	he following amount:				
□\$125	3.00 Filing Fee	■\$130.00 Filing For Certificate of State		Certifi	5.00 Filing Foo & ad Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Matte	g Address			Street Address	

New Filing Section
Division of Corporations P.O. Box 6327

Taliahassee, FL 32314

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

H24000128464 3

ARTICLES OF ORGANIZATION FOR FLOR	TIMITED LIABILITY COMPANY
ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
TCG Mgmt Services LLC	
(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE 11 - Address: The mailing address and street address of the principal office of	of the Limited Liability Company is:
Principal Office Address:	Malling Address:
7293 NW 2nd Avenue	7293 NW 2nd Avenue
Mismi, FL 33150	Miami, FL 33150
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Regis another business emity with an active Florida registration.)	

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

Caldera Law PLLC		
	Name	
7293 NW 2nd Aven	ue	
Florida street addre	ss (P.O. Box <u>NOT</u> ex	xxeptable)
Miami	FL	33150
City	State	7in

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 603, F.S.,

Benjamin Wolkov
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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