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09/06/2024

NAME:

RIGHT BY YOU COLLEGE ADVISING LLC

TYPE OF FILING: ARTICLES

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AUTHORIZATION: ABBIE/PAUL HODGE

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COVER LETTER

TO:	New Filing Se Division of Co						
427.115.742		ou College Advising LLC					
SUBJE	CI:	Name of Lir	nited Liab	pility Company		_	
The enc	closed Articles of	COrganization and fee(s) ar	e submitte	ed for filing.			
		ondence concerning this ma		· ·			
	Howard Git	ten					
			Name (of Person			<u> </u>
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	New F Divisio P.O. B	iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, Ft. 3230	issee et, Suite 810		

The name of the Limited Liability Company is:

Right by You College Advising LLC

ARTICLE I - Name:

ARTICLE II - Address:

200 NE 14th Ave Unit 9 Fort Lauderdale, FL 33301 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 of another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Howard Gitten Name 200 NE 14th Ave, Unit 9 Florida street address (P.O. Box NOT acceptable) Fort Lauderdale City State

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

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.,

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Howard Gitten Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

HARACSEN A. A. C. A.A.	Name and Address:
"AMBR" = Authorized Mem "MGR" = Manager	er
AMBR	Marjorie Gitten
	200 NE 14th Ave. Unit 9
	Fort Lauderdale, FL 33301
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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)