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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. **REGAL FI LLC**

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

*Articles of Organization

State of Florida Limited Liability Company Pursuant to Section 605.0201, Fla. Stat.:

Article I - NAME

The name of the Limited Liability Company is as follows: REGAL FI LLC

Article II - TYPE

The entity being formed is a Limited Liability Company.

Article III - ADDRESS

The street address (principal office address) for the Limited Liability Company are as follows:

Limited Liability Company Address:

2851 S OCEAN BLVD UNIT 1H BOCA RATON, FL 33432

The mailing address for the limited liability company are the same.

Article IV - REGISTERED AGENT INFORMATION

The name and address of the registered agent are as follows:

Shaban Malik

5300 W HILLSBORO BLVD Suite 218 COCONUT CREEK, FL 33073

The street address and the mailing address of the registered agent are the same.

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SECRETARY OF STATE
DIVISION OF CONFORATIONS

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, Shaban Malik, hereby accept the appointment as registered agent and consent 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 of the Florida Statutes.

Auch Mai

Signature of Registered Agent

Article V - STRUCTURE

This limited liability will have the following members and be member-managed:

ABBAS HAIDER

2851 S OCEAN BLVD UNIT 1H BOCA RATON, FL 33432

Member-Manager

Article VI - PURPOSE OF BUSINESS

Any and all lawful and legal business

Article VII - EFFECTIVE DATE

The effective date of these Articles of Organization will be the date this document is filed with the Florida Division of Corporations.

EXECUTION

Signature of organizer:

Such Man

Printed name of organizer:

SHABAN MALIK

Title of organizer:

CPA

Statement of signatory:

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

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