

LLC-12

20-E04512

FILED

In the office of the Secretary of State of the State of California

OCT 06, 2020

 $\label{local_local_local_local} \textbf{IMPORTANT} \ -- \ \text{Read instructions before completing this form.}$

Filing Fee - \$20.00

Copy Fees – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

				This Space For Office Use Only				
1. Limited Liability Company Name (Enter the exact name of the	ELLC. If you r	egistered in Californ	nia using an a	alternate name, see instruction	ns.)			
INTERGLOBE COMMODITIES, LLC								
2. 12-Digit Secretary of State File Number 3. State,		Foreign Country or Place of Organization (only if formed outside of California					California)	
200621910119 CALIF		ORNIA						
4. Business Addresses								
a. Street Address of Principal Office - Do not list a P.O. Box		City (no abbreviations)			State			
1508 south Beverly Glen Blvd, Apt # 201 b. Mailing Address of LLC, if different than item 4a		Los Angeles City (no abbreviations)			CA	90024 Zip Code		
1508 south Beverly Glen Blvd, Apt # 201		Los Angeles			State	90024		
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box		City (no abbreviations)			State			
1508 south Beverly Glen Blvd, Apt # 201		Los Angeles			CA	90024		
If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).								
a. First Name, if an individual - Do not complete Item 5b lan		Middle Name Roy		Richards			Suffix	
b. Entity Name - Do not complete Item 5a								
c. Address 1508 south Beverly Glen Blvd, Apt # 201		City (no abbreviations) Los Angeles			State	Zip Code 90024		
6. Service of Process (Must provide either Individual OR Corporation.)								
INDIVIDUAL – Complete Items 6a and 6b only. Must include agent's full name and California street address.								
a. California Agent's First Name (if agent is not a corporation)		Middle Name Roy		Last Name Richards			Suffix	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 1508 south Beverly Glen Blvd, Apt # 201		City (no abbreviations) Los Angeles			State CA	00004		
CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.								
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b								
7. Type of Business								
a. Describe the type of business or services of the Limited Liability Company commodities broker&investment consulting								
8. Chief Executive Officer, if elected or appointed								
a. First Name lan		Middle Name Roy		Last Name Richards			Suffix	
b. Address 1508 south Beverly Glen Blvd, Apt # 201		City (no abbreviations) Los Angeles		State CA				
9. The Information contained herein, including any attachn	nents, is tru	e and correct.						
10/06/2020 Ian Roy Richards		C	CEO					
Date Type or Print Name of Person Completing t	the Form		Γitle	Signature				
Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)								
Name:		7						

Company:
Address:
City/State/Zip: