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NAME:

TOPO UAV, LLC

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AUTHORIZATION: ABBIE/PAUL HODGE

abbie Hodge

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED 2021 APR 27 PH 12: 21

The name of the Limited Liability Company is:

SECRETALLY OF STATE
TALLAMASSEE, FL

TOPO UAV, LLC

(Must contain the words "Limited Liability 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:

Prin	cipal Office Address:		Mailing Address:	
6955 NW 77th Ave			6955 NW 77th Ave	
Suite 301			Suite 301	
Miami, FL 33166			Miami, FL 33166	
another business entity with The name and the Florida str	Ū			
		Name		
	1535 N Park Dr. Suite	104		
	Florida street address (P.O. Box NOT acceptable)			
	Weston	FL	33326	
	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, 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..

/s/ Maria Parjus	
Registered Agent's Signature (REQUIRED)	

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:		Name and Address:	
"MGR" = Ma	uthorized Member		
MGR	nagei	Maria A. Baralt	
MCK		90 SW 3rd Street Apt 2508	
		Miami, FL 33130	
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f an effective date is I ne date of filing.) <u>Sote:</u> If the date insert	isted, the date must be spected in this block does not move date on the Department of	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 da eet the applicable statutory filing requirements, this date will not be f State's records.	
			<u> </u>
REOUIRED	SIGNATURE:		
	/:\/	Maria A. Baralt Antonorsi	
	This document is executed I am aware that any false i	d in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.	
	Maria A. Baralt Antonorsi	Typed or printed name of signee	

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)