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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : CLARA GIRALDO ENROLLED AGENT  
Account Number : I19990000017  
Phone : (305)485-9300  
Fax Number : (305)485-1098

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
CYBER-ES, LLC.**

2022 AUG 22 PM 4:44

FLORIDA  
SECRETARY OF STATE

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2022 AUG 22 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF**

**CYBER-ES, LLC.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**CYBER-ES, LLC**

**ARTICLE II - ADDRESS**

The principal office of the Limited Liability Company is:

**150 SE 2<sup>ND</sup> AVE STE 321  
MIAMI, FL. 33131**

The mailing address shall be:

**150 SE 2<sup>ND</sup> AVE STE 321  
MIAMI, FL. 33131**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:**

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

**MARIA M. RODRIGUEZ**

**150 SE 2<sup>ND</sup> AVE STE 321  
Florida Street address (P.O.BOX NOT acceptable)  
MIAMI, FL. 33131  
City, State, and Zip**

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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..

*Maria M. Rodriguez*

**REGISTERED AGENT'S SIGNATURE**

**ARTICLE IV- MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**MARIA M. RODRIGUEZ**  
150 SE 2<sup>ND</sup> AVE STE 321  
MIAMI, FL. 33131

**AMBR**

**DIEGO A. MOLANO**  
150 SE 2<sup>ND</sup> AVE STE 321  
MIAMI, FL. 33131

**MANAGER**

*Maria M. Rodriguez*

Signature of a member or an authorized representative of a member.  
(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SECRETARY OF STATE  
TALLAHASSEE FL

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**MARIA M. RODRIGUEZ**