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FLORIDA LIMITED LIABILITY CO.
Shockwave ABF, LLC

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ARTICLES OF ORGANIZATION
OF
SHOCKWAVE ABF, LLC

The undersigned hereby certifies that the following Articles of Organization are hereby adopted for the purpose of becoming a Limited Liability Company under Florida Statutes Chapters 605, providing for the formation, rights, privileges, and immunities of limited liability companies for profit.

ARTICLE I.
NAME

The name of the Limited Liability Company shall be SHOCKWAVE ABF, LLC.

ARTICLE II.
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as of the date on which these Articles of Organization are filed with the State of Florida Department of State.

ARTICLE III.
PRINCIPAL OFFICE

The principal office of this corporation and the mailing address of this corporation is 2201 4th Street North, Suite 201, St. Petersburg, FL 33704.

ARTICLE IV.
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 2201 4th Street North, Suite 201, St. Petersburg, FL 33704 and the name of its initial registered agent at such address is Nan Ralston.

ARTICLE V.
PURPOSE

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

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ARTICLE VI.
MANAGEMENT

The Limited Liability Company shall be managed by one or more managers. The authority and duties of the manager(s) shall be as set forth in the Operating Agreement of the Limited Liability Company. The name and address of the initial Manager is Joseph Fitzgerald, 3725 East University Avenue, Des Moines, IA 50317.

The undersigned, being the Authorized Representative of one of the Members of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of SHOCKWAVE ABF, LLC.

Executed by the undersigned on 8/13, 2015.

SHOCKWAVE HOLDINGS, LLC

By: _____
JOSEPH FITZGERALD, Manager

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT
ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 605.0113, Florida Statutes, I agree to act in the capacity of Registered Agent for the SHOCKWAVE ABF, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 605.0113, Florida Statutes.

DATED this 17th day of August, 2015.

_____
NAN RALSTON

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