

Florida Department of State

Division of Corporations

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FLORIDA LIMITED LIABILITY CO.

Mobility Empowered, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
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CALLAHAN, E. H. (CDA)

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ARTICLES OF ORGANIZATION

FOR

MOBILITY EMPOWERED, LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I — NAME:

The name of the Limited Liability Company shall be: Mobility Empowered, LLC (the "Company").

ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

3897 Brooksworth Avenue
Tarpon Springs, FL 34688

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is 3897 Brooksworth Avenue, Tarpon Springs, Florida 34688, and the name of the registered agent at such address is Chris Kline.


ARTICLE IV — MANAGEMENT:

The Company shall be managed by one or more Managers. The name and addresses of the Managers are:

Chris Kline
3897 Brooksworth Avenue
Tarpon Springs, FL 34688

Alan Ruth
1851 Bassett Street #507
Denver, CO 80202

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 6th day of February, 2017. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


Chris Kline, Organizer

2/6/2017
Date

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**


Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

The name of the company is:

Mobility Empowered, LLC

The name and address of the registered agent and office is:

Chris Kline
3897 Brooksworth Avenue
Tarpon Springs, FL 34688


Chris Kline, Organizer

2/6/2017
Date

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.


Chris Kline, Registered Agent

2/6/2017
Date

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