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DEPARTMENT OF THE STATE OF THE

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

11 8 H

DATE:

6/1/17

NAME:

UNION TECH PROFESSIONAL LLC

TYPE OF FILING: ARTICLES

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Union Tech Professional 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:

Principal Office Address:

Mailing Address:

Rm 06, 22/F., Block B, Hong Cheung House, Cheung Hong Estate Tsing Yi, N.T., Hong Kong 3411 Silverside Rd. Ste. 104, Tatnall Bldg. Wilmington, DE 19810

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

FLORIDA FILING & SEARCH SERVICES INC.

Nam

155 OFFICE PLAZA DRIVE SUITE A

Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE

FL

32301

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	CHEUNG HO MAN - Rm 06, 22/F.,
	Block B, Hong Cheung House,
	Cheung Hong Estate, Tsing Yi
	N.T., Hong Kong
MGR	CHEUNG HO MAN - Rm 06, 22/F.,
	Block B, Hong Cheung House,
	Cheung Hong Estate, Tsing Yi
	N.T., Hong Kong
(Use attachment if necessary)	
	200
ICLE V: Effective date, if other than the di	ate of filing: (OPTIONAL)
	specific and cannot be more than five business days prior to or 90 days
ate of filing.)	
	ot meet the applicable statutory filing requirements, this date will not be lis
ocument's effective date on the Departme	ent of State's records.
ICLEVI. Other provisions if any	
ICLE VI: Other provisions, if any.	
CICLE VI: Other provisions, if any.	
ICLE VI: Other provisions, if any.	
CICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	S · · · /

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

constitutes a third degree felony as provided for in s.817.155, F.S.

Alexa Siemienski - Authorized Representative
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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)