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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120008000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. CRYPTOLOGY, LLC

Certificate of Status	1
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Help

ARTICLES OF ORGANIZATION ... FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	r
The name of the Limited Liability Company is:	
CRYPTOLOGY, UC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Lie Company is:	
Company is:	ahil in
6193 NW 183 d ST	LOIDIN
UNIT 172840	
Hialeah, FL 33017	
ARTICLETT	
The name and the Florida street address of the registered agent are: (The United Liab with an active Florida registered Agent. You must designate an individual or another business arein.)	
Company cannot serve as its own Registered Agent. You must designate an individual or another business entity	ullny
Toda Julius CASH	
6193 NW 18200 M	
6193 NW 183rd ST, UNIT 172840 Hidleah, FL 33017	
ARTICLE IV	
The name and title of each porces	
The name and title of each person authorized to manage and control the Limited	19
Toda Juliu Cash (AMBR)	FIL JAN 22 Allassi
	THE BOTTON
	RD 07

Required Signatures:

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. 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.

Typed or printed name of siguee

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)

19 JAN 22 AN 4: 07