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DATE: 01-25-19

NAME: EAST COAST ARBORISTS LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

EAST COAST ARBORISTS LLC

ARTICLE II ADDRESS

The principal address of the Limited Liability Company is:

1538 39TH STREET

WEST PALM BEACH, FLORIDA 33407

The mailing address of the Limited Liability Company is:

PO BOX 1321

WEST PALM BEACH, FLORIDA 33402

19 JAN 25 AM 9: 10 SLUMBIAST TELATINA TALL AHASSET TELORIDA

ARTICLE III REGISTERED AGENT

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

A1A REGISTERED AGENT INC.

5647 110TH AVENUE N

ROYAL PALM BEACH, FLORIDA 33411

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.

TINA MAKI / Registered Agent's signature

PAGE 2 EAST COAST ARBORISTS LLC

ARTICLE IV AUTHORIZED PERSON(S)

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER
CHRISTOPHER PETRAS
PO BOX 1321
WEST PALM BEACH, FLORIDA 33402

19 JAN 25 AM 9: 10 SHURE DEBY CLASSAGE TALL CHASSET FLORIDA

CHRISTOPHER PETRAS / Authorized Representative's signature

(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.)