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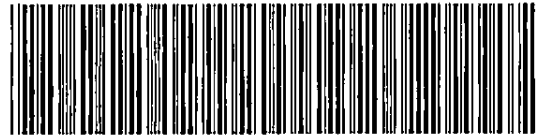
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**DATE: 5/13/19**

**NAME: PROFIT WITH KYRON LLC**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*Abbie Hodge*

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

Profit With Kyron LLC

**ARTICLE II: Address**

The mailing address and street address of the principal office of the Limited Liability Company is:

3325 NE 15th Street

Fort Lauderdale, FL 33304

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED  
AGENT SIGNATURE**

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

Kyron Eldridge

3325 NE 15th Street

Fort Lauderdale, FL 33304

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Having been named as registered agent 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.

X / s / Kyron Eldridge

Kyron Eldridge

/ Registered Agent's Signature

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

AMBR = AUTHORIZED MEMBER MGR = MANAGER

AMBR: Kyron Eldridge

3325 NE 15th Street

Fort Lauderdale, FL 33304

ARTICLE V: ANY OTHER PROVISION OR PURPOSE OF THE LIMITED LIABILITY COMPANY

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X / s / Kyron Eldridge

Kyron Eldridge

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.)

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