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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

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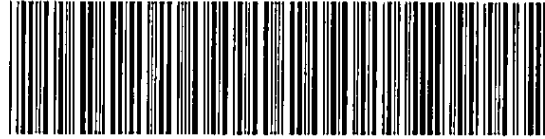
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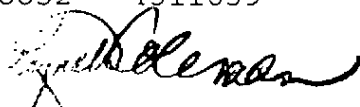
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 888852 4311639

AUTHORIZATION :



COST LIMIT : \$ 125.00

ORDER DATE : August 16, 2019

ORDER TIME : 8:58 AM

ORDER NO. : 888852-005

CUSTOMER NO: 4311639

DOMESTIC FILING

NAME: PROFIT OBJECTIVE, LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson - EXT.62968

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
OF
PROFIT OBJECTIVE, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is:

PROFIT OBJECTIVE, LLC

ARTICLE II: - Address

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

**9634 Edengrove Drive
Boynton Beach, FL 33473**

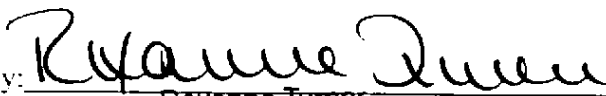
ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

**Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301**

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.

Corporation Service Company, Registered Agent

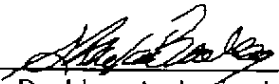
By: 
Name: Roxanne Turner
Title: Asst. Vice President

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TALLAHASSEE, FLORIDA

ARTICLE IV: - Management

The Member shall have the power to manage and control the Limited Liability Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on August 16, 2019.



Steven Buckley, Authorized Signer

(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 Section 817.155, Florida Statutes.)

Steven Buckley
Typed or printed name of signee

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STATE OF FLORIDA
DEPARTMENT OF STATE