

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L19000208172
FILED 8:00 AM
July 11, 2019
Sec. Of State
mtmoon

Article I

The name of the Limited Liability Company is:

BLOCK EV LLC

Article II

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

723 TRUMAN AVE
200121
TALLAHASSEE, FL. 32314

The mailing address of the Limited Liability Company is:

723 TRUMAN AVE
200121 MICHAEL WILLIAMSON
TALLAHASSEE, FL. 32314

Article III

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

MICHAEL WILLIAMSON
723 TRUMAN AVE
200121 MICHAEL WILLIAMSON
TALLAHASSEE, FL. 32314

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.

Registered Agent Signature: MICHAEL WILLIAMSON

Article IV

The effective date for this Limited Liability Company shall be:

07/05/2019

Signature of member or an authorized representative

Electronic Signature: MICHAEL WILLIAMSON

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

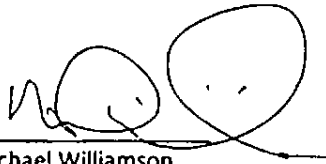
~~719000208172~~

Michael Williamson

Block Ev Corp.

100331868331 or Block Ev LLC

I, Michael Williamson am the owner of the business Block Ev Corp., I give consent for my newly filed business entity Block Ev LLC, to use the name of my existing entity.



Michael Williamson

Aug. 19, 2019

Loose cert. Attached
Notary

Acknowledgment by Individual

WELLS
FARGO

State of Florida

County of Miami - Dade

The foregoing instrument was acknowledged before me this 19 day
of August, 20 19, by Michael Williamson (name
of person acknowledging).

☐ Personally known to me

☒ Produced Identification

Type of Identification Produced

FL Driver License

Notary signature

Notary name (typed or printed)

Karina Kanakina

Title (e.g., Notary Public)

Notary Public

Place Seal Here



For Bank Purposes Only

Description of Attached Document

Type or Title of Document

Certification

Document Date

08/19/2019

Number of Pages

1

Signer(s) Other Than Named Above



F001-000DSG5350FL