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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ON TARPON TIME,	LLLC			
				
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				Art of Inc. File
				LTD Partnership File Foreign Corp. File
				L.C. File
			. Y	Fictitious Name File
				Trade/Service Mark
				Merger File
				Art. of Amend. File
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ARTICLES OF ORGANIZATION FOR

On Tarpon Time, LLC

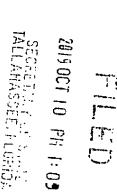
The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is On Tarpon Time, LLC

ARTICLE II: PRINCIPAL OFFICE

The principal office of the company is 36 N. Spring Boulevard, Tarpon Springs, FL 34689



ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Tara M. O'Connor, 9743 U.S. Highway 19, Port Richey, FL 34668

ARTICLE IV: AUTHORIZED MEMBERS

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

Billie J. Ryan, Authorized Member, 36 N. Spring Boulevard, Tarpon Springs

Michelle D. Ryan, Authorized Member, 36 N. Spring Boulevard, Tarpon Springs

The undersigned has executed these Articles of Organization for filing purposes this 9th day of Oct. 2019.

/S/ Billie J. Ryan		
	 <u>_</u>	n

Authorized Representative

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the Florida Statutes, the mentioned company, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

- 1. The name of the company is: On Tarpon Time, LLC
- 2. The name and street address of the registered agent and office is:

O'Connor Law Group PA, 9743 U.S. Highway 19, Port Richey, FL 34668

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.