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Florida Department of State

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FLORIDA LIMITED LIABILITY CO. BYRONICS VENTURES, LLC

Certificate of Status	11
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ARTICLES OF ORGANIZATION OF BYRONICS VENTURES, LLC

The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

ARTICLE I NAME

The name of this limited liability company is:

BYRONICS VENTURES, LLC

ARTICLE II PRINCIPAL OFFICE/MAILING ADDRESS

The principal office and mailing address of this limited liability company is:

10235 W Sample Road, Suite 205 Coral Springs, Florida, 33065

2020 JAN -8 AM 8: 49 SEURETARY OF STATE AND AHASSEE, FLORIDA

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

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

Ingrid M Bachelor 10235 W Sample Road, Suite 205, Coral Springs, Florida 33065

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.

Ingrid M Bachelor, Registered Agent

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ARTICLE IV MANAGEMENT

The limited liability company is to be managed by its members and is, therefore, a membermanaged company. The name and address of each Manager or Managing Member is as Follows:

> Byron B Bachelor 10235 W Sample Road Suite 205 Coral Springs, Florida 33065

Manager

Andrew B Bachelor 10235 W Sample Road Suite 205

Coral Springs, Florida 33065

Christina E Bachelor 10235 W Sample Road Suite 205 Coral Springs, Florida 33065

Ingrid M Bachelor 10235 W Sample Road Suite 205 Coral Springs, Florida 33065 Authorized Member

Authorized Member

Authorized Member

on B Bachelor, Authorized Representative of the Member

(In accordance with Section 605.0203(1Xb) Florida Statutes, the execution of this document constitutes an affirmation under 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.)