

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLC  
Account Number : I20100000075  
Phone : (305) 373-9419  
Fax Number : (305) 373-9443

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: blovelte@theasgardgroup.com

**FLORIDA LIMITED LIABILITY CO.**  
**Low-Coding Technologies LLC**

Certificate of Status	0
Certified Copy	1
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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

Fax Audit No. H20000228891 3

**ARTICLES OF ORGANIZATION  
OF  
LOW-CODING TECHNOLOGIES LLC**

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

**ARTICLE I**

The name of this limited liability company shall be Low-Coding Technologies LLC.

**ARTICLE II**

The mailing address and street address of the principal office of the limited liability company shall be 431 Seabreeze Avenue, Palm Beach, Florida 33480 with the privilege of having its offices and branch offices at other places within or without the State of Florida.

**ARTICLE III**

The initial registered office of this limited liability company is 431 Seabreeze Avenue, Palm Beach, Florida 33480. The initial registered agent at that address is Bradford S. Lovette.

**ARTICLE IV**

The limited liability company shall be manager-managed. The name and address of the initial manager of the limited liability company is:

Bradford S. Lovette  
431 Seabreeze Avenue  
Palm Beach, FL 33480

**ARTICLE V**

This limited liability company shall commence its existence as of the filing hereof and shall exist perpetually thereafter unless sooner dissolved.

TALLAHASSEE, FL  
STATE

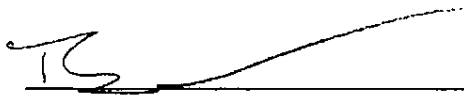
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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization of Low-Coding Technologies LLC on this 15<sup>TH</sup> day of July, 2020.

  
\_\_\_\_\_  
Bradford S. Lovette, Manager

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CLERK OF STATE  
TALLAHASSEE, FL

Fax Audit No. H20000228891 3

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 605.0113, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

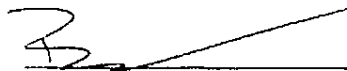
FIRST -- The name of the limited liability company is Low-Coding Technologies LLC.

SECOND -- The name and address of the registered agent and office is:

Bradford S. Lovette  
431 Seabreeze Avenue  
Palm Beach, FL 33480

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.

Dated as of the 15<sup>th</sup> day of July, 2020.

  
\_\_\_\_\_  
Bradford S. Lovette

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SECRETARY OF STATE  
PALM BEACH, FL