

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

L20000239092
FILED 8:00 AM
August 07, 2020
Sec. Of State
agent05

Article I

The name of the Limited Liability Company is:

COD CAPITAL LLC

Article II

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

9200 NW 39TH AVE
130 - 3043
GAINESVILLE, FL. 32606

The mailing address of the Limited Liability Company is:

9200 NW 39TH AVE
130 - 3043
GAINESVILLE, FL. 32606

Article III

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

STACEY L FLOWERS
417 SE 47TH TER
GAINESVILLE, FL. 32641

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: STACEY FLOWERS

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
CAMERON DORE
417 SE 47TH TER
GAINESVILLE, FL. 32641

Title: AMBR
OCTAVIA GLYMPH
551 APPLE CREEK DR
JACKSONVILLE, FL. 32218

Title: AR
ROBERT DORE
3324 WEST UNIVERSITY AVE #358
GAINESVILLE, FL. 32607

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Article V

The effective date for this Limited Liability Company shall be:

08/06/2020

Signature of member or an authorized representative

Electronic Signature: CAMERON DORE

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.