6/2/2021

L21000256744 *(handwritten over barcode text)*

Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: **Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000219360 3)))

H210002193603ABCY

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```
To:
        Division of Corporations
        Fax Number      : (850)617-6381

From:
        Account Name    : REGISTERED AGENTS INC.
        Account Number  : I20090000081
        Phone           : (307)200-2803
        Fax Number      : (855)330-1010
```

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

Email Address:_____

FLORIDA LIMITED LIABILITY CO.

Access Sales LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$125.00

2021 JUN -2 PM 5:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

2021 JUN -2 PM 3:49

Electronic Filing Menu   Corporate Filing Menu   Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Access Sales LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	**Mailing Address:**
3036 PARK AVE APT 1	3036 PARK AVE APT 1
RIVIERA BEACH, FL 33404	RIVIERA BEACH, FL 33404

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Northwest Registered Agent, LLC
_____
Name

7901 4th ST N STE 300
_____
Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg, FL 33702
_____
City   State   Zip

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..

_____
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager

Name and Address:

AMBR

THOMAS JOHNSON
3036 PARK AVE APT 1
RIVIERA BEACH, FL 33404

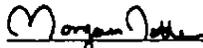(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

_____
_____
_____

REQUIRED SIGNATURE:

Morgan Noble
Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Morgan Noble
Typed or printed name of signee

Filing Fees:
$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)