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CAPITAL CONNECTION, INC.

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E CHRIS 2779, L	LC		
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			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
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			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
			Fictitious Owner Search
Signature			Vehicle Search
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ARCHELES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

- 50

ARCHELES OF OUGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY	Con-
ARTICLE I - Name:	2021 JUL 27 FM12: 38
The name of the Limited Liability Company is:	SECRET OF STATE TALL TALLS ASSEE, FL
F (1) - 2770 110	TALLANDESTATE
E Chris 2779, LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	- Set FL
(Music Company to the words Limited Districtly Company, LL.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 Addr	tu:
19991 NE 10th Place Way the same	
North Miami, FL 33179	
	
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 ind another business entity with an active Flurida registration.)	liviGual of
The state of the s	
The name and the Florida street address of the registered agent are:	
Earl Christian	
Namo	•
19991 NE 10th Place Way	
Florida street address (P.O. Box NOT acceptable)	
North Miami, FL 33179	
City State Zip	
daving been named as registered agent and to accept service of process for the above stated limited liabilulace designated in this certificate. I hereby accept the appointment as registered agent and agree to act to arther agree to comply with the provisions of all stanstes relating to the proper and complete performance and familiar with and accept the obligations of my position as registered agent as provided for in Chapter of the Agent's Signature (REQUIRED) Registered Agent's Signature (REQUIRED)	n this capacity. I e of my duties, and i
,	

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MCR	Earl Christian	_
	19991 NE 10th Place Way North Miami, FL 33179	_
	North Miami, FL 33179	
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E V: Effective date, if other than the date of filirective date is listed, the date must be specific as filing.) the date inserted in this block does not meet the nent's effective date on the Department of State E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in a I am aware that any folse inform	e applicable statutory filing requirements, this date will not be records.	days eff

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)

ARTICLE IV-