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EQS MANAGEMENT, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 JUL 29 PH 2: 16
SECRETAIN OF STATE
TALLAPASSEE, FL

ART	ICL	EI-	Na	me:

The name of the Limited Liability Company is:

	DALLY
EQS Management, LLC	
(Must conatin the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal o	ffice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
250 Congress Park Dr. Apt 208	250 Congress Park Dr, Apt 208
Delray Beach, FL 33445	Delray Beach, FL 33445
ARTICLE III - Registered Agent, Registered Office, of The Limited Liability Company cannot serve as its own unother business entity with an active Florida registration. The name and the Florida street address of the registered	Registered Agent. You must designate an individual or n.)
Corporate Creations Ne	

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..

FL.

State

33408

Zip

North Palm Beach

City

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Author	Name and Address:	
"MGR" = Manager		
MGR	PRI, LLC	
	250 Congress Park Dr. Apt 208 Delray Beach, Fl. 33445	
	Octiny October 217 3 34447	
		
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(Use attachment if n	TO TO THE STATE OF	_
(Osc anachment II I	scessary)	
the date of filing.) Note: If the date inserted in	if other than the date of filing:	
the document's effective date	on the Department of State's records.	ico as
ARTICLE VI: Other provisio	ns, if any.	
		<u>-</u>
REQUIRED SIGN.	ATURE:	
i aisi	Signature of a member or an authorized representative of a member. document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, aware that any false information submitted in a document to the Department of State litutes a third degree felony as provided for in s.817.155, F.S.	
	Aaron Granoff, Authorized Signer	
	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)