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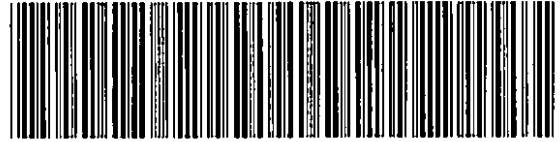
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DATE: 8/02/21

NAME: SWAM CREATION, LLC

TYPE OF FILING: ARTICLES

COST: 125.00

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE *Abbie Hodge*

**ARTICLES OF ORGANIZATION
FLORIDA LIMITED LIABILITY COMPANY**

SWAM Creation, LLC

ARTICLE I—Name

The name of the Limited Liability Company is: **SWAM Creation, LLC**

ARTICLE II—Address

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

**1428 Brickell Ave. Unit 202
MIAMI, FL 33131**

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

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

Paracorp Incorporated

155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301
Leon County

Please see attached.

Registered Agent's Signature

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ARTICLE IV- Managers

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

Title:

Name and Address:

Manager

**Jorge Penna
1428 Brickell Ave. Unit 202
MIAMI, FL 33131**

ARTICLE V—Effective Date

Upon Filing

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.

DocuSigned by:

8EFEC4D07B8B489 ..

Jorge Penna
Manager

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

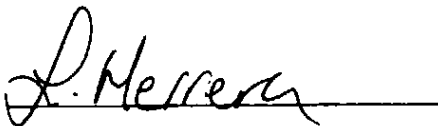
DATE: 08/02/2021

ENTITY NAME: SWAM Creation, LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

A handwritten signature in black ink, appearing to read 'L. Herrera', is written over a horizontal line.

Leticia Herrera, Assistant Secretary
Paracorp Incorporated

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