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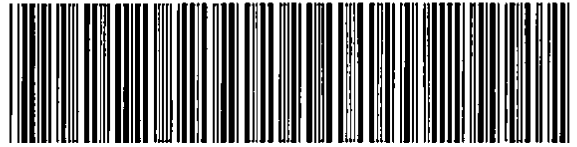
(Business Entity Name)

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TALLAHASSEE, FL

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**CORPORATE  
ACCESS,  
INC.**

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**1. MN INVESTMENTS LLC**

(CORPORATE NAME AND DOCUMENT #)

**2.**  
(CORPORATE NAME AND DOCUMENT #)

**3.**  
(CORPORATE NAME AND DOCUMENT #)

**4.**  
(CORPORATE NAME AND DOCUMENT #)

**5.**  
(CORPORATE NAME AND DOCUMENT #)

**6.**  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 31, 2021

CORPORATE ACCESS

SUBJECT: MN INVESTMENTS LLC  
Ref. Number: W21000119089

*Corrected*

We have received your document for MN INVESTMENTS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 721A00020959

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
FOR  
LEBRUN & SON LLC**

SECRETARY OF STATE  
TALLAHASSEE, FL

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

**ARTICLE I — NAME:**

The name of the Limited Liability Company shall be: Lebrun & Son LLC (the "Company").

**ARTICLE II — ADDRESS:**

The mailing address and street address of the principal office of the Company shall be as follows:

10213 Heron Pond Terrace  
Burke, VA 22015

**ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:**

The address of the initial registered office of the Company in the State of Florida is 140 S. University Drive, Suite B, Plantation, FL. 33324 and the name of the registered agent at such address is Moody Accounting Services, Inc. c/o Ciara Garcia.

**ARTICLE IV — MANAGEMENT:**

The Company shall be managed by one or more Managers. The name and address of the initial Manager is:

Brendan Anthony  
10213 Heron Pond Terrace,  
Burke, VA 22015

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 2nd day of September 2021. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

  
Brendan Anthony, Organizer

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:  
  
LEBRUN & SON LLC
2. The name and address of the registered agent and office is:  
  
Ciara Garcia  
Moody Accounting Services, Inc.  
140 S University Drive Suite B  
Plantation, Florida 33324

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SECRETARY OF STATE  
TALLAHASSEE, FL

Brendan Anthony  
Brendan Anthony, Organizer  
9/3/21  
DATE

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.

Ciara L. Garcia, Accountant  
Ciara Garcia, Title:  
9/3/21  
DATE