

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L21000508236
FILED 8:00 AM
November 18, 2021
Sec. Of State
nculligan**

Article I

The name of the Limited Liability Company is:

LUNAL SERVICES LLC

Article II

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

3006 CARING WAY
402
PORT CHARLOTTE, FL. 33952

The mailing address of the Limited Liability Company is:

3006 CARING WAY
402
PORT CHARLOTTE, FL. 33952

Article III

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

LEADER INSURANCE & SERVICES LLC
5354 S SAN MATEO DRIVE
NORTH PORT, FL. 34288

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.

Registered Agent Signature: SUZIMERE CARVALHO

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR
MARCIA MARIA LINS LIMA
3006 CARING WAY APT 402
PORT CHARLOTTE, FL. 33952 US

Title: AP
MARCIA MARIA LINS LIMA
3006 CARING WAY APT 402
PORT CHARLOTTE, FL. 33952 US

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Article V

The effective date for this Limited Liability Company shall be:

11/16/2021

Signature of member or an authorized representative

Electronic Signature: SUZIMERE CARVALHO

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.