## L3800099813

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## Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

## **ORDER FORM**

Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

FROM Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 3/10/2022  ORDER ENTITY  SATOSHI MANAGEMENT COMPANY	PRIORITY Regular Approval	OUR REF.#_(O	SETTRETARY O	IAR 10	15842
PLEASE PERFORM THE FOLLOW SATOSHI MANAGEMENT COM New LLC filing			F STATE , FLORIO A	AH ID: 57	
NOTES:	minders: shelems@sundocfilings.com				
Email address for annual report fer	minders. shelems@sundochlings.com				

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, March 10, 2022 Page I of I

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA	NY

Satoshi Management Company, LLC		
(Must contain the words "Limited Liab	lity Company, "L.L.C" or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the principal office	of the Limited Liebility Company is	
The maining address and street address of the principal effice	of the Emitted Clabinty Company is.	
Principal Office Address:	Mailing Addi	ress:
Principal Office Address:  90 Franklin St 1F	Mailing Addi 90 Franklin St 1F	ress:
· · · · · · · · · · · · · · · · · · ·		ress:
90 Franklin St 1F	90 Franklin St 1F	ress:

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

Steven S Eng

14 Booth Blvd

Safety Harbor

City

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..

Name

Florida street address (P.O. Box NOT acceptable)

State

Zip

Registered Agent's Signature (REQUIRED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Steven S Eng
	114 John St #503
	New York, NY 10038
	ASS
	ma ma
	<del></del>
	1.00 1.00 1.00
<del></del>	
(Use attachment if necessary)	
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## Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent