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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088 April 26, 2022 Date:___ Name: GREG PINTACUDA 1655742 Reference #:____ **TCK TECH LLC** Entity Name:_____ ✓ Articles of Incorporation/Authorization to Transact Business Amendment ☐ Change of Agent Reinstatement Conversion Merger Dissolution/Withdrawal Fictitous Name Other ____ Authorized Amount:

Signature:

COVER LETTER

	ew Filing Sec ivision of Co						
SUBJECT	TCK TEC						
,,eth,let	•		Limited Liabil	ity Company			
The enclos	ed Articles of	Organization and fee(s	s) are submittee	I for filing.			
Please retu	rn all corresp	ondence concerning thi	s matter to the	following:			
	Lili A. Skru	mbis, Paralegal					
			Name of	`Person			
	Barnes & T	hornburg LLP					
	Firm/Company						
	2029 Centur	ry Park E. Suite 300					
		,	Addi	ess			
	Los Angeles	s. CA 90067					
	lili.skrumbis(@btlaw.com	City/State ar	nd Zip Code			
-		E-mail address: (to be t	ised for future :	innual report notificat	ion)		
For further in	aformation co	oncerning this matter, pl	ease call;				
	Lili A. Skrui		310	284-3867 _)			
	Nair	ne of Person		Daytime Telephon	ne Number		
Enclosed is	a check for t	he following amount:					
□\$125.00	Filing Fee	□\$130.00 Filing Fe Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	New F Division P.O. E	ng Address Filing Section on of Corporations Box 6327 assec, FL 32314		Street Address New Filing Section D The Centre of Tallah: 2415 N. Monroe Stre Tallahassee, FL 3230	assee eet, Suite 810		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

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TCK TECH LLC	TALLAHASSEE EI
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") 6	b "LEAMASSEE, FLE

ARTICLE II - Address:

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

Principal Office Address:	<u> Mailing Address</u> :
c/o Craigmuir Chambers, 71 Road Town Tortola, VG 1110, British Virgin Islands	(same)

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Cogency Global Inc	•	
	Name	
115 North Calhoun	Street, Suite 4	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Tallahassee	FL	32301
City	State	Zip

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..

Patrick Kellner, Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager <u>MGR</u>	ZHAOKE Zhu c/o Craigmuir Chambers, 71 Road Town Tortola, VG 1110, British Virgin Islands
	APR 26 PH I2: 21
(Use attachment if necessary)	
(If an effective date is listed, the date must be sp the date of filing.) <u>Note:</u> If the date inserted in this block does not r the document's effective date on the Department	of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	KRI
This document is execu I am aware that any falso	ember or an authorized representative of a member, ted in accordance with section 605.0203 (1) (b), Florida Statutes, a information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.
<u>Lili A. Skrumbis</u>	Authorized Representative 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)