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Division of Corporations

## Florida Department of State

Division of Corporations

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Account Name : FOGARTY, MUELLER, HARRIS, PLLC  
 Account Number : 120200000168  
 Phone : (813)549-4490  
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CORPORATIONS  
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## FLORIDA LIMITED LIABILITY CO.

## AS Operations, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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 TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
OF  
AS OPERATIONS, LLC**

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act, and pursuant to the following Articles of Organization:

**ARTICLE 1**  
**Name**

The name of this limited liability company is: **AS Operations, LLC** (hereafter, the "Company").

**ARTICLE 2**  
**Effective Date**

The Company shall have perpetual existence, commencing on the date that these Articles of Organization are filed with the Florida Department of State.

**ARTICLE 3**  
**Mailing Address and Principal Office**

The address of the principal office and the mailing address of the Company is 915 N. Franklin St., Unit 2301, Tampa, Florida 33602.

**ARTICLE 4**  
**Initial Registered Office and Agent**

The street address of the initial registered office of the Company is 100 E. Madison Street, Suite 202, Tampa, FL 33602, and the name of the initial registered agent of the Company that address is Micah G. Fogarty.

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ARTICLE 5  
Management of the Company

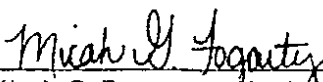
The Company is to be managed by one or more managers and is, therefore, a manager-managed limited liability company within the meaning of Section 605.0102(39) of the Act. The name and address of the initial manager of the Company are:

Ryan Sparks  
915 N. Franklin St., Unit 2301  
Tampa, Florida 33602

ARTICLE 6  
Indemnification

The Company shall indemnify its managers and members to the fullest extent authorized by law.

IN WITNESS WHEREOF, the undersigned authorized representative of the member has executed these Articles of Organization on July 5, 2022.

  
\_\_\_\_\_  
Micah G. Fogarty, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE OF  
AS OPERATIONS, LLC**

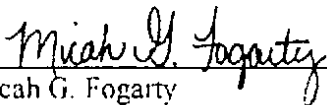
Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is: AS Operations, LLC.
2. The name and address of the registered agent and office are:

Micah G. Fogarty  
100 E. Madison Street, Suite 202  
Tampa, FL 33602

*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, Florida Statutes.*

Dated: July 5, 2022.

  
\_\_\_\_\_  
Micah G. Fogarty

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