Electronic Articles of Organization For Florida Limited Liability Company

L22000367030 FILED 8:00 AM August 22, 2022 Sec. Of State adjohnson

Article I

The name of the Limited Liability Company is: SWFLUX, LLC

Article II

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

710 PONDELLA RD SUITE 7 #1063 NORTH FORT MYERS, FL. US 33903

The mailing address of the Limited Liability Company is:

710 PONDELLA RD SUITE 7 #1063 NORTH FORT MYERS, FL. US 33903

Article III

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

INC AUTHORITY RA 390 NORTH ORANGE AVE., STE 2300-N ORLANDO, FL. 32801

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: TREVOR ROWLEY

Article IV

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

Title: MGR DANIELLE WALLACE 710 PONDELLA RD SUITE 7 #1063 NORTH FORT MYERS, FL. 33903 US

Title: MGR DOUGLAS CARNEY 710 PONDELLA RD SUITE 7 #1063 NORTH FORT MYERS, FL. 33903 US

Signature of member or an authorized representative

Electronic Signature: DANIELLE WALLACE

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.

L22000367030 FILED 8:00 AM August 22, 2022 Sec. Of State adjohnson