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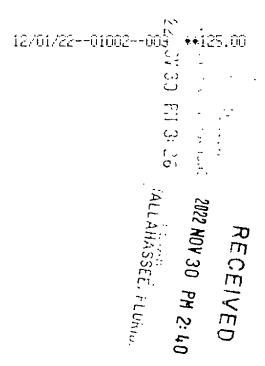
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	y Management Services, LLC ust contain the words "Limited		w MI L C Year MI L C W	_	
		Liabinty Compar	ly, "E.L.C., or "LLC.")		
ARTICLE II - Address: The mailing address and	street address of the principal	office of the Limit	ed Liability Company is:		
	rincipal Office Address:		Mailing Address:		
5020 Tamiam	5020 Tamiami Trail N., #112		020 Tamiami Trail N., #112		
Naples, FL 34	103	<u>N</u>	aples, FL 34103	_	
-				_	
ARTICLE III - Register	red Agent, Registered Office,	& Registered Ag	gent's Signature:	100	
(The Limited Liability Co another business entity w	mpany cannot serve as its own ith an active Florida registration	n Registered Agen	t. You must designate an individual or		
		OM I		-	
	_			C-3	•
	street address of the registere				•
	_	d agent are:			-
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	street address of the registere	d agent are:			
	street address of the registere Andrew J. Saluan	d agent are: Name N., #112	acceptable)		
	street address of the registere Andrew J. Saluan 5020 Tamiami Trail	d agent are: Name N., #112	acceptable)		
	Andrew J. Saluan 5020 Tamiami Trail Florida street address	d agent are: Name N., #112 ss (P.O. Box NOT			

(CONTINUED)

ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company: Title: "AMBR" = Authorized Member "MGR" = Manager MGR Andrew J. Saluan 5020 Tamiami Trail N.. #112 Naples, FL 34103 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: January 1, 2023 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

This limited liability company is a manager-managed limited liability company.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as

REQUIRED SIGNATURE:

ARTICLE VI: Other provisions, if any.

the document's effective date on the Department of State's records.

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Jeff Novatt, Esq., 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)