(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Name)
(Doe	cument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to f	Filing Officer:	

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Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 170563 AUTHORIZATION : COST LIMIT : ORDER DATE: December 1, 2022 ORDER TIME : 2:45 PM ORDER NO. : 170563-005 CUSTOMER NO: 4365401 DOMESTIC FILING NAME: MBULL HOLDINGS, LLC EFFECTIVE DATE: ____ ARTICLES OF INCORPORATION ___ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX ___ PLAIN STAMPED COPY

EXAMINER'S INITIALS:

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MBull Holdin	gs, LLC		
(Mu	st conatin the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and s	treet address of the principal offi	ce of the Limited	Liability Company is:
<u>P</u>	rincipal Office Address:		Mailing Address:
		•	D: : 100 A11
18501 Collins	Avenue, Unit 4701	Sam	e as Principal Office Address
North Miami ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.	Registered Agelegistered Agent.	
North Miami ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.	Registered Ager egistered Agent.	nt's Signature:
North Miami ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. Street address of the registered a Corporation Service Co	Registered Ager egistered Agent.	nt's Signature:
North Miami ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. Street address of the registered a Corporation Service Co	Registered Ageregistered Agent.) gent are:	nt's Signature:
North Miami ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. Street address of the registered a Corporation Service Co	Registered Agent.) gent are: ompany	nt's Signature: You must designate an individual
North Miami ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. Street address of the registered a Corporation Service Control of the c	Registered Agent.) gent are: ompany	nt's Signature: You must designate an individual

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605; F.S..

Corporation Service Company

Extensive Company

By Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Matthew Bullock	
MOK	18501 Collins Avenue, Unit 4701	
	North Miami Beach, FL 33160-3768	
	•	
		-
(Use attachment if necessary)	: -)
••	! #	
LE V: Effective date, if other than the date ffective date is listed, the date must be sp	e of filing: (OPTIONAL) Decific and cannot be more than five business days prior to or 90 d	 lays
LE V: Effective date, if other than the date ffective date is listed, the date must be spe of filing.)	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not b	-
LE V: Effective date, if other than the date ffective date is listed, the date must be sper of filing.) If the date inserted in this block does not a turnent's effective date on the Department of LE VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not b	•
LE V: Effective date, if other than the date ffective date is listed, the date must be spe of filing.) If the date inserted in this block does not imment's effective date on the Department	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not b	•
ILE V: Effective date, if other than the date ffective date is listed, the date must be speed filing.) If the date inserted in this block does not a nument's effective date on the Department of LE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a metal than any false is executed.	meet the applicable statutory filing requirements, this date will not be of State's records. Leave the applicable statutory filing requirements, this date will not be of State's records. Leave the applicable statutory filing requirements, this date will not be of State's records. Leave the applicable statutory filing requirements, this date will not be of State's records. Leave the applicable statutory filing requirements, this date will not be of State will not	•
ILE V: Effective date, if other than the date ffective date is listed, the date must be sper of filing.) If the date inserted in this block does not a nument's effective date on the Department of LE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a mean of this document is executed I am aware that any false constitutes a third degree.	meet the applicable statutory filing requirements, this date will not be of State's records. Local State's records. Local State St	•

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)