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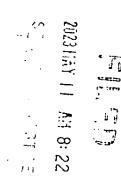
(Requestor's Name)
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S CHATHAM





ACCOUNT NO. : I2000000195 REFERENCE: 732888 AUTHORIZATION : COST LIMIT : \$ 130'.00 ORDER DATE: May 10, 2023 ORDER TIME : 8:57 AM ORDER NO. : 732888-005 CUSTOMER NO: 7565950 DOMESTIC FILING NAME: QUANNNIC LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION ____ CERTIFICATE OF LIMITED PARTNERSHIP _____ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Alexxis Weiland-sorenson - EXT.

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

COVER LETTER

	New Filing Section Division of Corporations			
154.545 F45.65	Quannuic LLC			
SUBJEC		ame of Limited	Liability Company	
The enck	osed Articles of Organization an	id fee(s) are sul	omitted for filing.	
Please ret	arn all correspondence concern	ing this matter	to the following:	
	Scott Felcher			
		. N	ame of Person	
	Felcher & Freifeld, LLP			
		F	irm/Company	
	358 Fifth Avenue, Suite 901			
		· -	Address	
	New York, New York, 1000	1		
	scott@ffmusiclaw.com	City S	itate and Zip Code	
	E-mail address: (to be used for	future annual report notifica	ation)
For further	information concerning this ma	tter, please cal	l:	
	Scott Felcher	212	695-7800	
	Name of Person	Area (
Enclosed	is a check for the following amo	ount:		
	00 Filing Fee — 🕱\$130,00 Fil Сепійсые об	ing Fee & Status	□\$155,00 Filing Fee & Certified Copy dditional copy is enclosed)	Ti\$160.00 Filing Tee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Comoratio	IIS	Street Address New Filing Section I The Centre of Tallal	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Quannnic LLC				_
(Must co	natin the words "Limited	Liability Compa	ny, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street	address of the principal of	office of the Limi	ted Liability Company is:	
Principal Office Address:			Mailing Address:	
10790 Cypress Bend Drive		c	c/o 10790 Cypress Bend Drive	
Boca Raton, Florida, 33498		E	Boca Raton, Florida, 33498	
				2023 HA
(The Limited Liability Compar	ny cannot serve as its own	Registered Age	gent's Signature: nt. You must designate an individual or	2023 HAY
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration	Registered Age on.)		2023 HAY 1
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration	Registered Age on.)		2023 HAY TT MI
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration	n Registered Age on.) d agent are: Company		-
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration at address of the registered	i Registered Agei on.) d agent are:		1 8:
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration at address of the registered	n Registered Age on.) d agent are: Company		-
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own active Florida registration active Florida registration address of the registered Corporation Service	Registered Ager on.) d agent are: Company Name	nt. You must designate an individual or	11 MI 8: 2
ARTICLE III - Registered A (The Limited Liability Compai another business entity with ar The name and the Florida stree	ny cannot serve as its own active Florida registration active Florida registration address of the registered Corporation Service 1201 Hays Street	Registered Ager on.) d agent are: Company Name	nt. You must designate an individual or	11 MI 8: 2

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..

Corporation Service Company

By Willay Jren Su, MY

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Nicholas Rothschild 10790 Cypress Bend Drive Boca Raton, Florida, 33498	
	(7) 	2023 HAY
		H 8: 22
dle en decesión		
If an effective date is listed, the date must be ne date of filing.)	late of filing:	•
RTICLE VI: Other provisions, if any.		

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 \$.817,155, F.S.

Nicholas Rothschild
Typed or printed name of signee

as

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

8 5.00 Certificate of Status (Optional)