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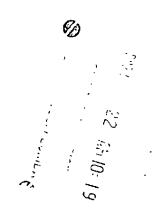
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
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Certified Copies	Certificates of Status
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SECRETARY OF STA



Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

TO Florida Department of State

> The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 6/22/2023

PRIORITY Regular Approval

OUR REF # (Order ID#) 1159714

ORDER ENTITY

RAE STARK ENTERPRISES, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

RAE STARK ENTERPRISES, LLC (FL)

New LLC filing

NOTES:

\$125.00 Authorized

Email address.for.annual report reminders: corp2@servico.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, June 22, 2023 Page 1 of 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Article I

The name of the Limited Liability Company is:

RAE STARK ENTERPRISES, LLC

Article II

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

3105 NW 15th Street Delray Beach, FL 33445-7613

The mailing address of the Limited Liability Company is:

3105 NW 15th Street Delray Beach, FL 33445-7613

Article III

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

Deborah Arrigo 3105 NW 15th Street Delray Beach, FL 33445-7613

Having been named as registered agent and to accept service of process for the above states 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: s/Deborah Arrigo

Article IV

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

AMBR Deborah Arrigo 3105 NW 15th Street Delray Beach, FL 33445-7613

Article V

The effective date for this Limited Liability Company shall be:

6/22/2023

Article VI

Other provisions, if any:

Signature of member or an authorized representative

Dated: June 22, 2023

s/Scott J. Schuster

Scott J. Schuster. Authorized Representative

I am the member or authorized representative submitting these Articles or 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.

2023 JUN 22 PM 5: 39 SECRETARY OF STAT