123000465169

(Requestor's Name)	
(Address)	- 300416
(Address)	_
(City/State/Zip/Phone #)	S. CHATHAM
PICK-UP WAIT MAIL	
(Business Entity Name)	-
	10/11/280
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7

Office Use Only



300416346243

77 77 78 77 59 125.00 10/11/21--01002--007

> 2023 OCT 10 PM 3: SECRETARY OF 5 TA

CORPORATE

When you need ACCESS to the world

ACCESS, ____ INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: BROOK 10/10 **CERTIFIED COPY** XX**PHOTOCOPY** GS LLC XXFILING 1. QUEEN CAPITAL FUNDING LLC (CORPORATE NAME AND DOCUMENT #) 2. (CORPORATE NAME AND DOCUMENT #) 3. (CORPORATE NAME AND DOCUMENT #) 4. (CORPORATE NAME AND DOCUMENT #) 5. (CORPORATE NAME AND DOCUMENT #) 6. (CORPORATE NAME AND DOCUMENT #) SPECIAL **INSTRUCTIONS:**

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Atom	Funding LLC contain the words "Limited L	iability Company	"1 1 6 " or "11 6 ")	
(NIUS	contain the words. Limited L	liaointy Company,	L.L.C., OF LLC.	
ΓICLE II - Address:				
mailing address and st	eet address of the principal of	fice of the Limited	Liability Company is:	
<u>Pr</u>	incipal Office Address:		Mailing Address:	
1 SE 3rd Aven	ie. Suite 2720	1 SE	3rd Avenue, Suite 2720	
Miami, Fl 3313	l	Mia	mi, Fl 33131	
ICLE III - Registere	d Agent, Registered Office, & apany cannot serve as its own I han active Florida registration	& Registered Ager Registered Agent.	it's Signature:	ual or
FICLE III - Registere Limited Liability Con her business entity wit	d Agent, Registered Office, & apany cannot serve as its own I han active Florida registration treet address of the registered	& Registered Ager Registered Agent.	it's Signature:	ual or
FICLE III - Registere Limited Liability Con her business entity wit	d Agent, Registered Office, & apany cannot serve as its own I han active Florida registration	& Registered Agent. (Registered Agent. (1)) agent are:	it's Signature:	ual or
FICLE III - Registere Limited Liability Con her business entity wit	d Agent, Registered Office, & apany cannot serve as its own I han active Florida registration treet address of the registered	& Registered Ager Registered Agent.	it's Signature:	ual or
FICLE III - Registere Limited Liability Con her business entity wit	d Agent, Registered Office, & apany cannot serve as its own I han active Florida registration treet address of the registered	& Registered Agent. Registered Agent. agent are:	it's Signature:	ual or
FICLE III - Registere Limited Liability Con her business entity wit	d Agent, Registered Office, & apany cannot serve as its own I han active Florida registration treet address of the registered and Matthew Walsh	Registered Agent. Registered Agent. agent are: Name	it's Signature: You must designate an individ	ual or
FICLE III - Registere Limited Liability Con her business entity wit	d Agent, Registered Office, & apany cannot serve as its own I han active Florida registration treet address of the registered a Matthew Walsh 1 SE 3rd Avenue, Suit	Registered Agent. Registered Agent. agent are: Name	it's Signature: You must designate an individ	ual or

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..

> /s Matthew Walsh Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Matthew Walsh
	29 Highview Road
	Darien, CT 06820
AMBR	Jake D'Amelio
	251 NE 95th Street
	Miami Shores, Fl 33138
	<u> </u>
	-£.
(Use attachment if necessary)	og: (OPTIONÁL)
SI 12 M. T.C. with days (Casharakarakarakarakarakarakarakarakarakara	ıg: (OPTIONÂL)
	g: (OPTIONAL) and cannot be more than five business days prior to or 90 days a
e of filing.)	and control be more than the business days prior to or yo days
If the date inserted in this block does not meet the	e applicable statutory filing requirements, this date will not be list
ument's effective date on the Department of State	e's records.
LE VI: Other provisions, if any.	
DE VI. Other provisions, it any.	
REQUIRED SIGNATURE:	
/s Jake D`Amelio	

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.

Jake D'Amelio

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)