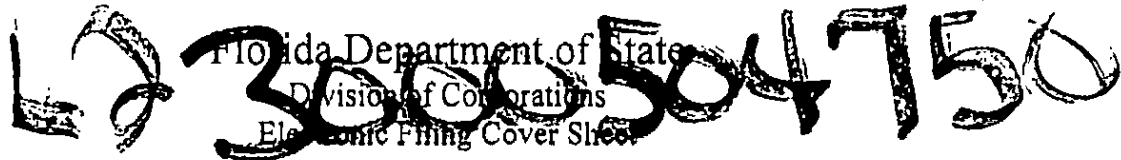


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Division of Corporations



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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : HENDEE MCKERNAN SCHROEDER WILKERSON & HENDEE PA  
Account Number : I19980000066  
Phone : (813)258-1177  
Fax Number : (813)259-1106

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: lbattle@hendeelaw.com

## FLORIDA LIMITED LIABILITY CO.

Chivukula RE GP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

T.J.H.

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**ARTICLES OF ORGANIZATION OF  
CHIVUKULA RE GP, LLC**

**ARTICLE I-Name**

The name of the limited liability company shall be Chivukula RE GP, LLC.

**ARTICLE II-Address**

The street address and the mailing address of the principal office of the limited liability company is:

**Street address:**

16506 Pointe Village Drive  
Suite 103  
Lutz, Florida 33558-5255

**Mailing Address:**

16506 Pointe Village Drive,  
Suite 103  
Lutz, Florida 33558-5255

**ARTICLE III-Registered Agent**

The name and the Florida street address for the registered agent of the limited liability company is:

Hendee, McKernan, Schroeder, Wilkerson & Hendee, P.A.  
1700 South MacDill Avenue, Suite 200  
Tampa, Florida 33629

**ARTICLE IV-Management**

The name and address of each person authorized to manage and control the limited liability company is:

Krishna Chivukula  
16506 Pointe Village Drive  
Suite 103  
Lutz, Florida 33558-5255

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 6<sup>th</sup> day of November, 2023.

By: CRMZ

Signature of Member or authorized representative of a member

In accordance with Section 605.0205(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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**REGISTERED AGENT****ACCEPTANCE OF DESIGNATION**

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the duties, and the undersigned is familiar with and accepts the obligations of the position as registered agent as provided for in Chapter 605, Florida Statutes.

**REGISTERED AGENT:**

Hendee, McKernan, Schroeder, Wilkerson &  
Hendee, P.A.

By: PB McKernan II  
Name: Peter B. McKernan II  
Title: Vice President

1700 South MacDill Avenue  
Suite 200  
Tampa, Florida 33629

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