

1240000067107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

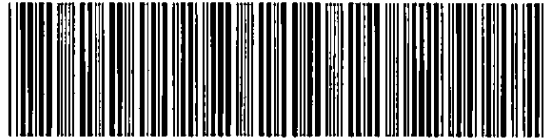
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Certified Copies _____

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SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2024 FEB -8 PM 1:30

TALLAHASSEE, FL 32399-0400

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 2/8/2024

****WALK IN****

ENTITY NAME TESLA CAPITAL, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$125.00

ACCOUNT #: I20160000072

S. R. J. M.

Please call Tina at the above number for any issues or concerns. *Thank you so much!*

**ARTICLES OF ORGANIZATION
OF
TESLA CAPITAL, LLC**

ARTICLE I: NAME

The name of the limited liability company is Tesla Capital, LLC (the "LLC").

ARTICLE II: ADDRESS

The street and mailing address of the principal office of the LLC is 6615 Boynton Beach Blvd., Suite 815, Boynton Beach, FL 33437.

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the initial registered agent of the LLC are:

NRAI Services, Inc.

1200 South Pine Island Road

Plantation, FL 33324

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 of the Florida Statutes.

NRAI Services, Inc.
By: Natalie Leiba-Paul

Natalie Leiba-Paul - Assistant Secretary

Registered Agent

ARTICLE IV: MANAGEMENT

The LLC will be manager-managed.

ARTICLE V: MANAGERS

The name and address of each person authorized to manage and control the LLC:

Title:

Manager

Name and Address:

Inessa Konjevic

6615 Boynton Beach Blvd., Suite 815,
Boynton Beach, FL 33437

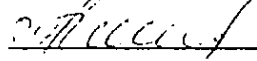
Inessa Konjevic

Inessa Konjevic, Authorized Person

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TALLAHASSEE, FL

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In accordance with Section 605.0203(1)(b) of the Florida Revised Limited Liability Company Act, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Florida Department of State constitutes a third-degree felony as provided for in Section 817.155 of the Florida Statutes.

A handwritten signature in cursive script, appearing to read "Inessa Konjevic", is written over a horizontal line.

Inessa Konjevic, Authorized Person