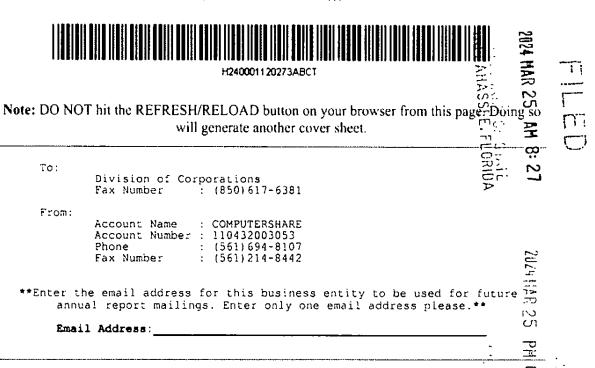
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. Gana Pay, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

ARTICLES OF ORGANIZATION OF GANA PAY, LLC

March 22, 2024

ARTICLE I - Name:

The name of the Limited Liability Company is: Gana Pay, LLC.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4475 US Hwy #1 South, Suite 301 Saint Augustine, FL 32086

4475 US Hwy #1 South, Suite 301 Saint Augustine, FL 32086

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:_

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

Pete R. Pizarro 4475 US Hwy #1 South, Suite 301 Saint Augustine, FL 32086

ARTICLE IV - Management:

The Limited Liability Company shall be manager-managed.

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.

Registered Agent's Signature

IN WITNESS WHEREOF, the undersigned Authorized Representative has signed these Articles of Organization as of the date first written above.

GANA PAY, LLC

Name: Pete R. Pizarro

Title: Authorized Representative

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