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AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
(Must contain the words "Limited Liability Company, "L.L.C.," or "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:
1496 NW Schwinn LT 1496 NW Schwinn CT
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Soyce Hamilton
1496 n. w Schwing Of, Florida street address (P.O. Box NOT acceptable)
Sasper FL 32052 City State Zip
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 (REQUIRED)
2924
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Title: 'AMBR" = Authorized Member 'MGR" = Manager	Name and Address:	
Carvin Smith	1496 NW Schwinn ET	
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		—- [:]
EV: Effective date, if other than the dective date is listed, the date must be	ate of filing: 01/26/2024 (OPTIONAL) specific and cannot be more than five business days prior to or	
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ARTICLE IV-