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CORPORATE ACCESS,

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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

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1.	1117 PIZZA, LLC		
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SPECIA	L INSTRUCTIONS:		

ARTICLES OF ORGANIZATION FOR 1117 PIZZA, LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I — NAME:

The name of the Limited Liability Company shall be: 1117 Pizza, LLC (the "Company").

ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

4226 Belle Grove Court Belle Isle, FL 32812

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is 9100 Conroy Windermere Rd Ste 200 Windermere, FL 34786, and the name of the registered agent at such address is Dickens Wealth Management, LLC.

ARTICLE IV - MANAGEMENT:

The Company shall be managed by one or more Managers. The names and addresses of the initial Managers are:

Robert Bair 4226 Belle Grove Court Belle Isle, FL 32812

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this _____day of May 2024. In accordance with Section 505.0201 of the Act, the execution of these Articles of Organization constitutes an affurmation reads the penalties of perjury that the facts stated herein are true.

Robert Bair, Organizer

<u>CERTIFICATE OF DESIGNATION</u> <u>REGISTERED AGENT/REGISTERED OFFICE</u>

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:

1117 Pizza, LLC

2. The name and address of the registered agent and office is:

Dickens Wealth Management, LLC
9100 Conroy Windermere Rd
Suite 200
Windermere, Florida 34786

Robert Bair, Organizer

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.

DICKENS WEALTH MANAGEMENT, LLC

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Ву: //	0	L	
By: / Print Name:	Chris	Diekens	
Title:	VP		_
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