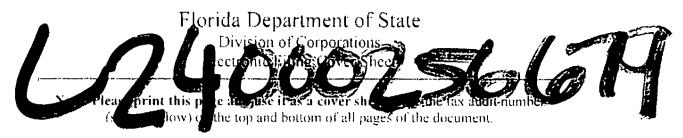
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Division of Corporations



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Division of Corporations

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From:

Account Name : ELO ENTERPRISES, INC

Account Number : I20150000109 Phone : (561)544-8862 Fax Number : (954)697-0130

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FLORIDA LIMITED LIABILITY CO. ATOMIC COMPANY LLC

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ATOMIC COMPANY USA LLC

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Division of Corporations

June 7, 2024

ELO ENTERPRISES, INC

SUBJECT: ATOMIC COMPANY LLC

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Tim Burch Operations Manager A FAX Aud. #: H24000199677 Letter Number: 024A00012369 From: Lyslei Chirico

ARTICLESOFORGANIZATIONFORFLORIDALIMITEDILIABILITYCOMPANY

	IC COMPANY USA LLC (Must contain the words "Limited Linbil	tity Company, "L.L.C.," or "LLC,")
LEII - Addro	ess:	
iling address ar	nd street address of the principal office of	of the Limited Liability Company is
	Principal Office Address:	Mailing Address:
47(0) NV	V BOCA RATON BEND #202	4700 NW BOCA RATON BLVD #202
BOCAR	CATON, FL 33431	BOCA RATON, FL 33431

ELO EN FERP	RESES, INC	
	Name	
4700 NW Boca I	Raion Blvd #202	
Florida street addres	s (P.O. Box <u>NOT</u> a	cceptable)
Boca Raton	FL	33431
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)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
$^{n}MGR^{n} = Manager$	
MGR	IGOR SOUTO DAMASIO
	1706 NW BOCA RATON BLVD -202
	BOCA RATON, FL 33431
	····
(Use attachment (Triccessary)	
CTICLE V: Effective date, if other than the c	date of filing (OPTIONAL)
an effective date is listed, the date must be	e specific and cannot be more than five business days prior to or 90 days after
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e document's effective date on the Departm	nent of State's records.
RTICLE VI: Other provisions, if any.	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
DEAUDED CLASSTUDE.	
REQUIRED SIGNATURE:	LOCA SOLET DOLLS LO
	AGOR SOUTO DAMASÃO
Signature of a	member or an authorized representative of a member.
	ecuted in accordance with section 605,0203 (1) (b), Florida Statutes
	false information submitted in a document to the Department of State
	egree felony as provided for in s.817 155, F.S
ASSE A	OUTO DAMASIO - Manager

Typed or printed name of signee