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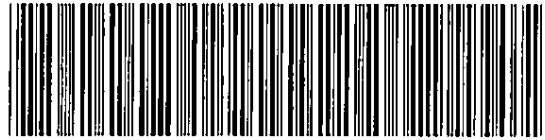
(Business Entity Name)

(Document Number)

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MICHELE M. LEWIS P.A.

July 8, 2024

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: ABL Consulting Gourp, LLC

To Whom It May Concern:

Enclosed are the Articles of Organization for ABL Consulting Group, LLC which are submitted for filing. Also, enclosed is a check in the amount of \$125.00 for the filing fee. Please return all correspondence concerning this matter to me at the address or email below.

Very truly yours,

A handwritten signature in black ink, appearing to read "Michele M. Lewis", written over a horizontal line.

Michele M. Lewis

Encl.

ARTICLES OF ORGANIZATION

OF

ABL CONSULTING GROUP, LLC a Florida Limited Liability Company

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Act, F.S. Chapter 605, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I – NAME

The name of the limited liability company shall be ABL Consulting Group, LLC

ARTICLE II – PURPOSE

The Limited Liability Company is organized to engage in any business permitted by the Florida Statutes.

ARTICLE III – ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 321 Leeward Drive, Jupiter, FL 33477.

ARTICLE IV – DURATION

The period of duration for the Limited Liability Company shall be: Perpetual.

ARTICLE V – MANAGEMENT

The Limited Liability Company is to be manager managed and the name and address of the Manager is: Andrea Levinson, 321 Leeward Drive, Jupiter, FL 33477.

ARTICLE VI – ADMISSION OF ADDITIONAL MEMBERS

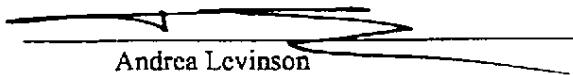
Members shall have the right to admit new members by unanimous consent.

ARTICLE V – REGISTERED OFFICE AND AGENT

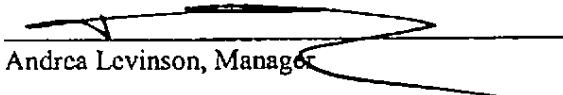
The name and street address of the initial registered agent of the Company in the State of Florida is: Andrea Levinson, 321 Leeward Drive, Jupiter, FL 33477

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent 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.


Andrea Levinson
Registered Agent

IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of Organization at Jupiter, Florida, on this 1 day of ~~June~~^{July}, 2024.


Andrea Levinson, Manager

STATE OF New York)
)ss.
COUNTY OF Onondaga)

The foregoing instrument was subscribed and sworn to before me by means of [X] physical presence or [] online notarization this 1 day of ~~June~~^{July}, 2024, by Andrea Levinson [] who are personally known to me or [X] who have produced Drivers License as identification.

(SEAL)

ALEXANDER M. GERE
Notary Public, State of New York
Qualified in Onondaga County
Reg. No. 01GE0008301
My Commission Expires May 19, 2027


Notary Public
My Commission Expires: 05.19.2027