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(City/State/Zip/Phone #)

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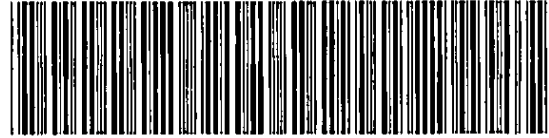
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LLC

1. LABOR FORCE SOLUTIONS, LLC

(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR  
LABOR FORCE SOLUTIONS, 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: Labor Force Solutions, LLC (the "Company").

**ARTICLE II — ADDRESS:**

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

2262 Pixie Way  
Plant City, Florida 33563

**ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:**

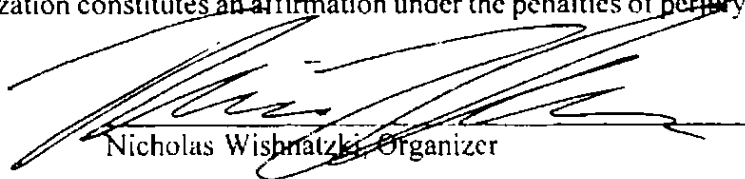
The address of the initial registered office of the Company in the State of Florida is 2262 Pixie Way, Plant City, Florida 33563, and the name of the registered agent at such address is Gary Wishnatzki.

**ARTICLE IV — MANAGEMENT:**

The Company shall be managed by one or more Managers. The name and address of the initial Manager is:

Nicholas Wishnatzki  
2262 Pixie Way  
Plant City, Florida 33563

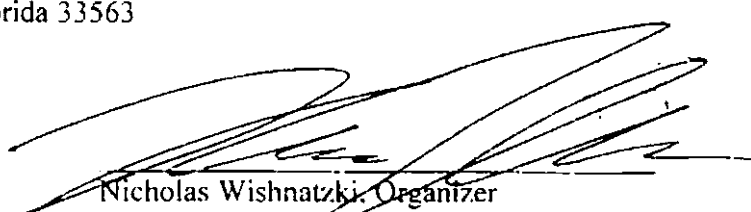
IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this October 4, 2024. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

  
Nicholas Wishnatzki, Organizer

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

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:  
  
Labor Force Solutions, LLC
2. The name and address of the registered agent and office is:  
  
Gary Wishnatzki  
2262 Pixie Way  
Plant City, Florida 33563

  
\_\_\_\_\_  
Nicholas Wishnatzki, Organizer

10/4/24  
\_\_\_\_\_  
DATE

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.

  
\_\_\_\_\_  
Gary Wishnatzki

Oct 14, 2024  
\_\_\_\_\_  
DATE