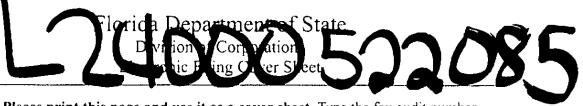
Division of Corporations



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## FLORIDA LIMITED LIABILITY CO. **ECS Royalty LLC**

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.12/16/2024 14:08 From:17189252027 To:18506176381 Date Time 12/16/24 02:08PM Pages: 3 P: 2/3 (((H24000412966 3))) ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: ŧ ECS Royalty LLC (Must conatin 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: 820 Arthur Godfrey Rd, Suite 202 820 Arthur Godfrey Rd, Suite 202 Miami Beach, FL 33140 Miami Beach, FL 33140 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: Corporate Creations Network Inc. Name 801 US Highway I Florida street address (P.O. Box NOT acceptable) North Palm Beach City 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. Tim Pratts, Special Secretary Registered Agent's Signature (REQUIRED) (CONTINUED)

412/16/2024 14:08 From:17189252027 To:18506176381 Date Time 12/16/24 02:08PM Pages: 3 P: 3/3 (((H24000412966 3)))

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	David Salamon 4465 Adams Ave Miami Beach, FL 33140
(Use attachment if necessary)  CLE V: Effective date, if other than the date	c of filing:
LEV: Effective date, if other than the dat ffective date is listed, the date must be spendfiling.) If the date inserted in this block does not	c of filing: (OPTIONAL)  pecific and cannot be more than five business days prior to or 90 da  meet the applicable statutory filing requirements, this date will not be
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LE V: Effective date, if other than the dat ffective date is listed, the date must be specifiling.)  If the date inserted in this block does not ument's effective date on the Department  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  /s//David  Signature of a m  This document is exect I am aware that any false constitutes a third degree.	meet the applicable statutory filing requirements, this date will not be tof State's records.   A Salamen  Tember or an authorized representative of a member, uted in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State