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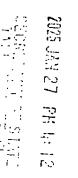
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S. CHATHAM



Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com



ORDER FORM

TO Florida Department of State

FROM

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 1/27/2025

PRIORITY Regular Approval

OUR REF # (Order ID#) 1343189

ORDER ENTITY
PERFECT PITCHER, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

PERFECT PITCHER, LLC (FL)

Please file the attached articles and provide a certified copy and certificate of status.

NOTES:

\$160.00 Authorized

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RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, January 27, 2025 Page 1 of 1

ARTICLES OF ORGANIZATION OF PERFECT PITCHER, LLC

ARTICLE I: NAME

The name of the limited liability company is Perfect Pitcher, LLC (the "LLC").

ARTICLE II: ADDRESS

The street address of the principal office of the LLC is 3471 Main Highway, Unit 1201, Miami, FL 33133-5931.

The mailing address of the LLC is 3471 Main Highway, Unit 1201, Miami, FL 33133-5931.

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the initial registered agent of the LLC are:

Incorporating Services, Ltd. 1540 Glenway Drive Tallahassee, Florida 32301

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 of the Florida Statutes.

Jeliosa A Moseau [REGISTERED AGENT'S SIGNATURE]

ARTICLE IV: MANAGEMENT

The LLC will be manager-managed.

ARTICLE V: MANAGER

The name and address of each person authorized to manage and control the LLC:

Title: Name and Address:

MGR Christopher Irion

3471 Main Highway, Unit 1201

Miami, FL 33133-5931

SIGNATURE OF A MEMBER OR AN AUTHORIZED REPRESENTATIVE OF A MEMBER

In accordance with Section 605.0203(1)(b) of the Florida Revised Limited Liability Company Act, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Florida Department of State constitutes a third-degree felony as provided for in Section 817.155 of the Florida Statutes.

Christopher Irion, Authorized Representative of Member