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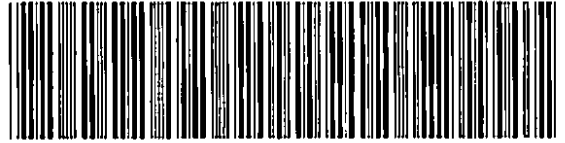
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- CERTIFIED COPY \_\_\_\_\_
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1. LOOSE CANNON ADVENTURES, LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

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**SPECIAL INSTRUCTIONS:**

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

**ARTICLES OF ORGANIZATION  
OF  
LOOSE CANNON ADVENTURES, LLC**

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Revised Limited Liability Company Act.

**ARTICLE I.  
NAME**

The name of the Company is LOOSE CANNON ADVENTURES, LLC.

**ARTICLE II.  
PRINCIPAL OFFICE**

The physical address and mailing address of the Company is 6639 Crescent Lake Dr., Lakeland, FL 33813.

**ARTICLE III.  
DURATION**

The Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

**ARTICLE IV.  
PURPOSE**

The Company is organized for the purpose of transacting any and all lawful business.

**ARTICLE V.  
MANAGEMENT**

The Company is to be a manager-managed company. The initial manager of the Company shall be:

Richard H. Cannon  
6639 Crescent Lake Dr.  
Lakeland, FL 3381

**ARTICLE VI.  
INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT**

The street address of the initial registered office of the Company is 6639 Crescent Lake Dr., Lakeland, FL 3381, and the name of the initial registered agent of the Company at that office

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is Richard H. Cannon.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of the  
Member of the Company has executed these Articles of Organization this 1 day of Sept  
2022.

  
\_\_\_\_\_  
RICHARD H. CANNON

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

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. The name of the Company is LOOSE CANNON ADVENTURES, LLC.

The name and street address of its initial Registered Agent and initial Registered Office are:

RICHARD H. CANNON  
6639 Crescent Lake Dr.  
Lakeland FL 33813

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.

  
RICHARD H. CANNON

Date: 9/1, 2022

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