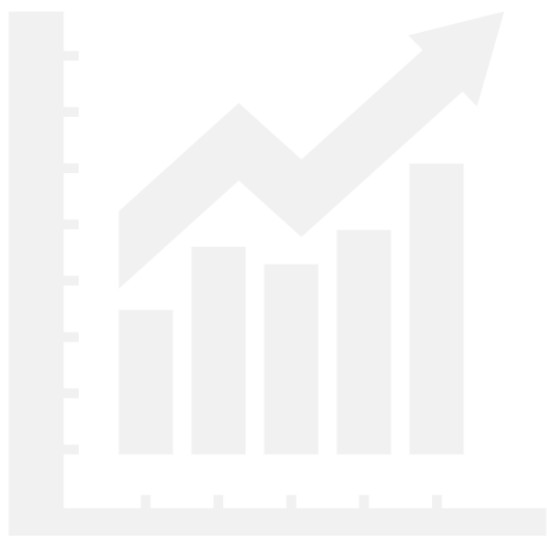


Articles of Organization



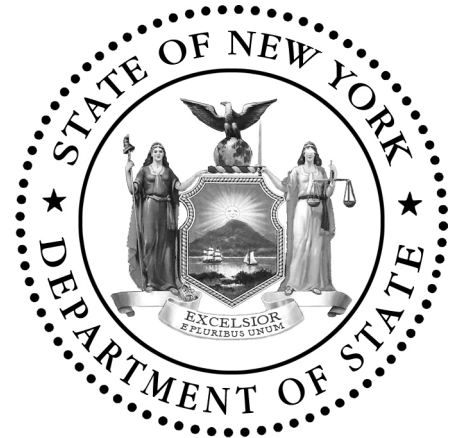
A set of formal documents filed with the Secretary of State to legally document the creation of a new business entity.



NEW YORK STATE DEPARTMENT OF STATE
DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE
FILING RECEIPT

ENTITY NAME : THE SUNRISE ELEMENT LLC
DOCUMENT TYPE : ARTICLES OF ORGANIZATION
ENTITY TYPE : DOMESTIC LIMITED LIABILITY COMPANY

DOS ID : 6887203
FILE DATE : 06/27/2023
FILE NUMBER : 230627003428
TRANSACTION NUMBER : 202306270003588-2144357
EXISTENCE DATE : 06/27/2023
DURATION/DISSOLUTION : PERPETUAL
COUNTY : KINGS



SERVICE OF PROCESS ADDRESS : FOSTER BROWN JR
834 PACIFIC ST APT 403,
BROOKLYN, NY, 11238, USA

ELECTRONIC SERVICE OF PROCESS
EMAIL ADDRESS :

N/A

REGISTERED AGENT : FOSTER BROWN JR
834 PACIFIC ST APT 403,
BROOKLYN, NY, 11238, USA

FILER : LOVETTE DOBSON
17350 STATE HWY 249, #220
HOUSTON, TX, 77064, USA

You may verify this document online at : <http://ecorp.dos.ny.gov>
AUTHENTICATION NUMBER : 100003803258

TOTAL FEES:	\$205.00	TOTAL PAYMENTS RECEIVED:	\$205.00
FILING FEE:	\$200.00	CASH:	\$0.00
CERTIFICATE OF STATUS:	\$0.00	CHECK/MONEY ORDER:	\$0.00
CERTIFIED COPY:	\$0.00	CREDIT CARD:	\$205.00
COPY REQUEST:	\$5.00	DRAWDOWN ACCOUNT:	\$0.00
EXPEDITED HANDLING:	\$0.00	REFUND DUE:	\$0.00

**ARTICLES OF ORGANIZATION
OF
THE SUNRISE ELEMENT LLC
Under Section 203 of the Limited Liability Company Law**

THE UNDERSIGNED, being a natural person of at least eighteen (18) years of age, and acting as the organizer of the limited liability company hereby being formed under Section 203 of the Limited Liability Company Law of the State of New York certifies that:

- FIRST: The Name of the limited liability company is: **THE SUNRISE ELEMENT LLC**
- SECOND: To engage in any lawful act or activity within the purposes for which limited liability companies may be organized pursuant to Limited Liability Company Law provided that the limited liability company is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency, or other body without such consent or approval first being obtained.
- THIRD: The county, within this state, in which the office of the limited liability company is to be located is **KINGS**
- FOURTH: The Secretary of State is designated as agent of the limited liability company upon whom process against the limited liability company may be served. The post office address to which the Secretary of State shall mail a copy of any process against the limited liability company served upon the Secretary of State by personal delivery is:
**FOSTER BROWN JR
834 PACIFIC ST APT 403
BROOKLYN, NY 11238**
- FIFTH: The limited liability company designates the following as its registered agent upon whom process against it may be served within the State of New York is:
**FOSTER BROWN JR
834 PACIFIC ST APT 403
BROOKLYN, NY 11238**
- SIXTH: The limited liability company is to be managed by: **One or more members**
- SEVENTH: The existence of the limited liability company shall begin **upon filing of these Articles of Organization with the Department of State.**
- EIGHTH: The limited liability company shall have a perpetual existence.

NINTH: The limited liability company shall defend, indemnify and hold harmless all members, managers, and former members and managers of the limited liability company against expenses (including attorney's fees, judgments, fines, and amounts paid in settlement) incurred in connection with any claims, causes of action, demands, damages, liabilities of the limited liability company, and any pending or threatened action, suit, or proceeding. Such indemnification shall be made to the fullest extent permitted by the laws of the State of New York, provided that such acts or omissions which gives rise to the cause of action or proceedings occurred while the Member or Manager was in performance of his or her duties for the limited liability company and was not as a result of his or her fraud, gross negligence, willful misconduct or a wrongful taking. The indemnification provided herein shall inure to the benefit of successors, assigns, heirs, executors, and the administrators of any such person.

I certify that I have read the above statements, I am authorized to sign these Articles of Organization, that the above statements are true and correct to the best of my knowledge and belief and that my signature typed below constitutes my signature.

LOVETTE DOBSON (Signature)

LOVETTE DOBSON, ORGANIZER
17350 STATE HWY 249
#220
HOUSTON, TX 77064

Filed by:

LOVETTE DOBSON
17350 STATE HWY 249
#220
HOUSTON, TX 77064