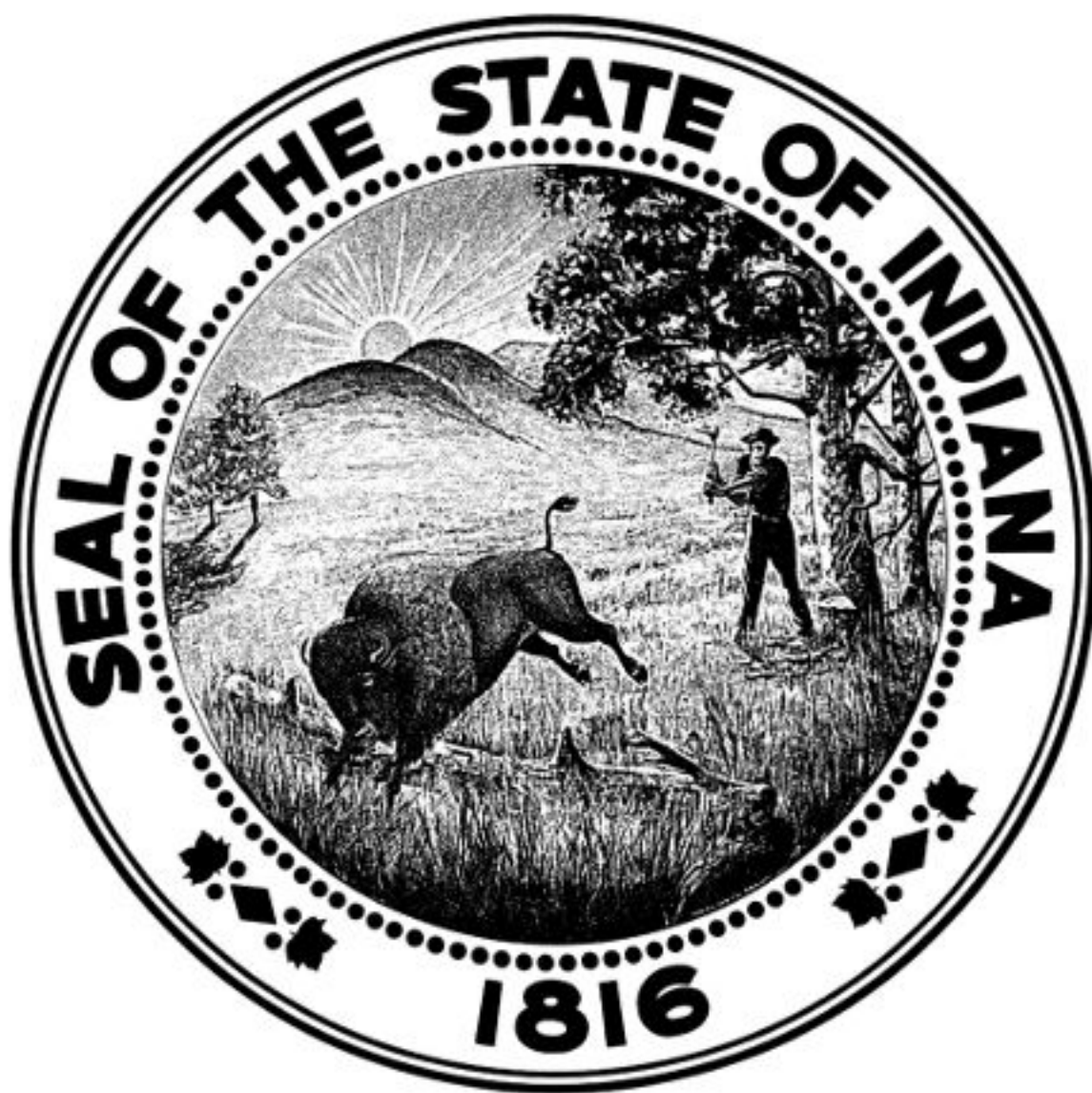


**State of Indiana**  
**Office of the Secretary of State**

Certificate of Organization  
of  
**PEARLSONAL LLC**

I, DIEGO MORALES, Secretary of State, hereby certify that Articles of Organization of the above Domestic Limited Liability Company have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code.

NOW, THEREFORE, with this document I certify that said transaction will become effective Sunday, January 11, 2026.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, January 12, 2026.

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

202601111958631 / 11161237

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>



**ARTICLES OF ORGANIZATION**

Formed pursuant to the provisions of the Indiana Code.

**ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS**

<b>BUSINESS ID</b>	202601111958631
<b>BUSINESS TYPE</b>	Domestic Limited Liability Company
<b>BUSINESS NAME</b>	PEARLSONAL LLC
<b>PRINCIPAL OFFICE ADDRESS</b>	2313 Redwood Ave, Fort Wayne, IN, 46803, USA

**ARTICLE II - REGISTERED OFFICE AND ADDRESS**

<b>REGISTERED AGENT TYPE</b>	Business Commercial Registered Agent
<b>NAME</b>	UNITED STATES CORPORATION AGENTS, INC.
<b>ADDRESS</b>	8520 Allison Pointe Blvd., Ste. 220, Indianapolis, IN, 46250, USA

**ARTICLE III - PERIOD OF DURATION AND EFFECTIVE DATE**

<b>PERIOD OF DURATION</b>	Perpetual
<b>EFFECTIVE DATE</b>	01/11/2026
<b>EFFECTIVE TIME</b>	08:30PM

**ARTICLE IV - GOVERNING PERSON INFORMATION**

<b>TITLE</b>	Member
<b>NAME</b>	Pearl James Paige
<b>ADDRESS</b>	2313 Redwood Ave, Fort Wayne, IN, 46803, USA

<b>TITLE</b>	Member
<b>NAME</b>	Tarik Issaka Saleh Mahamat
<b>ADDRESS</b>	2313 Redwood Ave, Fort Wayne, IN, 46803, USA

**APPROVED AND FILED**  
**DIEGO MORALES**  
**INDIANA SECRETARY OF STATE**  
01/12/2026 09:23 AM

**MANAGEMENT INFORMATION**

**THE LLC WILL BE MANAGED BY MANAGER(S)**      No  
**IS THE LLC A SINGLE MEMBER LLC?**              No

**SIGNATURE**

THE SIGNATOR(S) REPRESENTS THAT THE REGISTERED AGENT NAMED IN THE APPLICATION HAS CONSENTED TO THE APPOINTMENT OF REGISTERED AGENT.

THE UNDERSIGNED, DESIRING TO FORM A LIMITED LIABILITY COMPANY PURSUANT TO THE PROVISIONS OF THE INDIANA BUSINESS FLEXIBILITY ACT EXECUTES THESE ARTICLES OF ORGANIZATION.

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE, THIS DAY **January 11, 2026**.

THE UNDERSIGNED ACKNOWLEDGES THAT A PERSON COMMITS A CLASS A MISDEMEANOR BY SIGNING A DOCUMENT THAT THE PERSON KNOWS IS FALSE IN A MATERIAL RESPECT WITH THE INTENT THAT THE DOCUMENT BE DELIVERED TO THE SECRETARY OF STATE FOR FILING.

**SIGNATURE**    Pearl James Paige  
**TITLE**    Member

Business ID : 202601111958631  
Filing No : 11161237