



NORTH CAROLINA

Department of the Secretary of State

To all whom these presents shall come, Greetings:

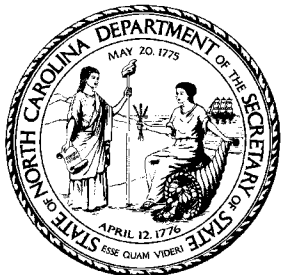
I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

ARTICLES OF ORGANIZATION

OF

MODERN CRAFT MAKER LLC

the original of which was filed in this office on the 6th day of May, 2021.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of May, 2021.

Elaine F. Marshall

Secretary of State

State of North Carolina
Department of the Secretary of State

SOSID: 2185856
Date Filed: 5/6/2021 9:16:00 AM
Elaine F. Marshall
North Carolina Secretary of State
C2021 116 02790

Limited Liability Company
ARTICLES OF ORGANIZATION

Pursuant to §57D-2-20 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Organization for the purpose of forming a limited liability company.

1. The name of the limited liability company is: Modern Craft Maker LLC
(See Item 1 of the Instructions for appropriate entity designation)
2. The name and address of each person executing these articles of organization is as follows: (State whether each person is executing these articles of organization in the capacity of a member, organizer or both by checking all applicable boxes.) **Note: This document must be signed by all persons listed.**

| Name | Business Address | Capacity | |
|--------------------------------|--|--|------------------------------------|
| <u>Jessica Lynn Zinsmaster</u> | <u>- 1054 Melody Ln Cameron NC, 28326-9043 United States</u> | <input checked="" type="checkbox"/> Member | <input type="checkbox"/> Organizer |
| _____ | _____ | <input type="checkbox"/> Member | <input type="checkbox"/> Organizer |
| _____ | _____ | <input type="checkbox"/> Member | <input type="checkbox"/> Organizer |

3. The name of the initial registered agent is: Jessica Lynn Zinsmaster

4. The street address and county of the initial registered agent office of the limited liability company is:

Number and Street 1054 Melody Ln
City Cameron State: NC Zip Code: 28326 County: Harnett

5. The mailing address, if different from the street address, of the initial registered agent office is:

Number and Street PO Box 1049
City Spring Lake State: NC Zip Code: 28390-1049 County: Cumberland

6. Principal office information: (Select either a or b.)

a. The limited liability company has a principal office.

The principal office telephone number: _____

The street address and county of the principal office of the limited liability company is:

Number and Street: _____

City: _____ State: _____ Zip Code: _____ County: _____

The mailing address, if different from the street address, of the principal office of the company is:

Number and Street: _____

City: _____ State: _____ Zip Code: _____ County: _____

b. The limited liability company does not have a principal office.

7. Any other provisions which the limited liability company elects to include (e.g., the purpose of the entity) are attached.

8. **(Optional):** Listing of Company Officials (See instructions on the importance of listing the company officials in the creation document.

| Name | Title | Business Address |
|-------------------------|---------------|----------------------------|
| Jessica Lynn Zinsmaster | Owner Manager | 1054 Melody Ln Cameron NC, |
| | | |

9. **(Optional):** Please provide a business e-mail address: Privacy Redaction
The Secretary of State's Office will e-mail the business automatically at the address provided above at no cost when a document is filed. The e-mail provided will not be viewable on the website. For more information on why this service is offered, please see the instructions for this document.

10. These articles will be effective upon filing, unless a future date is specified:

This is the 26th day of April, 2021.

Jessica Lynn Zinsmaster
Signature

Jessica Lynn Zinsmaster Member/Organizer
Type or Print Name and Title

The below space to be used if more than one organizer or member is listed in Item #2 above.

Signature

Type or Print Name and Title

Signature

Type or Print Name and Title

NOTE:

1. Filing fee is \$125. This document must be filed with the Secretary of State.