

Office of the Minnesota Secretary of State Certificate of Organization

I, Steve Simon, Secretary of State of Minnesota, do certify that: The following business entity has duly complied with the relevant provisions of Minnesota Statutes listed below, and is formed or authorized to do business in Minnesota on and after this date with all the powers, rights and privileges, and subject to the limitations, duties and restrictions, set forth in that chapter.

The business entity is now legally registered under the laws of Minnesota.

Name: Malivone LLC

File Number: 1595568600027

Minnesota Statutes, Chapter: 322C

This certificate has been issued on: 10/30/2025



A handwritten signature in black ink that reads "Steve Simon".

Steve Simon
Secretary of State
State of Minnesota

Office of the Minnesota Secretary of State
Minnesota Limited Liability Company/Articles of Organization
Minnesota Statutes, Chapter 322C



The individual(s) listed below who is (are each) 18 years of age or older, hereby adopt(s) the following Articles of Organization:

ARTICLE 1 - LIMITED LIABILITY COMPANY NAME:

Malivone LLC

ARTICLE 2 - REGISTERED OFFICE AND AGENT(S), IF ANY AT THAT OFFICE:

Name Address:

**Northwest Registered Agent
LLC**

202 N CEDAR AVE STE 1 OWATONNA MN 55060 2306 USA

ARTICLE 3 - DURATION: PERPETUAL

ARTICLE 4 - ORGANIZERS:

Name: Address:

**USA LLC FILING 23224 CRENSHAW BLVD TORRANCE CA
90505 3171 USA**

**MALIVONE 9542 DUNES AVE COTTAGE GROVE MN
BOUTSAVATH 55016 USA**

If you submit an attachment, it will be incorporated into this document. If the attachment conflicts with the information specifically set forth in this document, this document supersedes the data referenced in the attachment.

By typing my name, I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

SIGNED BY: CHRISTOPHER RHODE

MAILING ADDRESS: None Provided

EMAIL FOR OFFICIAL NOTICES: support@usa-llc-filing.com



Work Item 1595568600027
Original File Number 1595568600027

STATE OF MINNESOTA
OFFICE OF THE SECRETARY OF STATE
FILED
10/30/2025 11:59 PM

Steve Simon

Steve Simon
Secretary of State