

STATE OF NEVADA



FRANCISCO V. AGUILAR
Secretary of State

RUBEN J. RODRIGUEZ
Deputy Secretary for Southern Nevada

2250 Las Vegas Blvd North, Suite 400
North Las Vegas, NV 89030
Telephone (702) 486-2880
Fax (702) 486-2452

OFFICE OF THE
SECRETARY OF STATE

GABRIEL DI CHIARA
Chief Deputy Secretary of State

DEANNA L. REYNOLDS
Deputy Secretary for Commercial Recordings

401 N. Carson Street
Carson City, NV 89701
Telephone (775) 684-5708
Fax (775) 684-7141

Yevgeniy Grishin
4131 Halfmoon Bay Dr
Las Vegas, NV 89115, USA

Work Order #: W2025100801107
October 8, 2025
Receipt Version: 1

Special Handling Instructions:

Submitter ID: 948710

Charges

Description	Fee Description	Filing Number	Filing Date/Time	Filing Status	Qty	Price	Amount
Articles of Organization	Fees	20255227523	10/8/2025 12:30:46 PM	InternalReview	1	\$75.00	\$75.00
Initial List	Fees	20255227525	10/8/2025 12:30:47 PM	InternalReview	1	\$150.00	\$150.00
Initial List	Business License Fee	20255227525	10/8/2025 12:30:47 PM	InternalReview	1	\$200.00	\$200.00
Total							\$425.00

Payments

Type	Description	Payment Status	Amount
Credit Card	7599518333126976203292	Success	\$425.00
Credit Card	Service Fee	Success	\$10.63
Total			\$435.63

Credit Balance: \$0.00

Yevgeniy Grishin
4131 Halfmoon Bay Dr
Las Vegas, NV 89115, USA

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Total							\$425.00

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Business Entity - Filing Acknowledgement

10/08/2025

Work Order Item Number: W2025100801107 - 4770709
Filing Number: 20255227523
Filing Type: Articles of Organization
Filing Date/Time: 10/08/2025 12:30:46 PM
Filing Page(s): 2

Indexed Entity Information:

Entity ID: E52275242025-3

Entity Name: Norex LLC

Entity Status: Active

Expiration Date: None

Non-Commercial Registered Agent

Yevgeniy Grishin

4131 Halfmoon Bay Dr, Las Vegas, NV 89115, USA

The attached document(s) were filed with the Nevada Secretary of State, Commercial Recording Division. The filing date and time have been affixed to each document, indicating the date and time of filing. A filing number is also affixed and can be used to reference this document in the future.

Respectfully,

A handwritten signature in black ink that reads "FV Aguilar".

FRANCISCO V. AGUILAR
Secretary of State

STATE OF NEVADA

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Business Entity - Filing Acknowledgement

10/08/2025

Work Order Item Number: W2025100801107 - 4770710
Filing Number: 20255227525
Filing Type: Initial List
Filing Date/Time: 10/08/2025 12:30:47 PM
Filing Page(s): 2

Indexed Entity Information:

Entity ID: E52275242025-3

Entity Name: Norex LLC

Entity Status: Active

Expiration Date: None

Non-Commercial Registered Agent

Yevgeniy Grishin

4131 Halfmoon Bay Dr, Las Vegas, NV 89115, USA

The attached document(s) were filed with the Nevada Secretary of State, Commercial Recording Division. The filing date and time have been affixed to each document, indicating the date and time of filing. A filing number is also affixed and can be used to reference this document in the future.

Respectfully,

A handwritten signature in black ink that reads "FV Aguilar".

FRANCISCO V. AGUILAR
Secretary of State



FRANCISCO V. AGUILAR
 Secretary of State
 401 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Filed in the Office of <i>FV Aguilar</i>	Business Number E52275242025-3
Secretary of State State Of Nevada	Filing Number 20255227523
	Filed On 10/08/2025 12:30:46 PM
	Number of Pages 2

Formation - Limited-Liability Company

- | | |
|---|--|
| <input checked="" type="checkbox"/> NRS 86 - Articles of Organization Limited-Liability Company | <input type="checkbox"/> NRS 86.544 - Registration of Foreign Limited-Liability Company |
| <input type="checkbox"/> NRS 89 - Articles of Organization Professional Limited-Liability Company | <input type="checkbox"/> NRS 86.555 - Registration of Professional Foreign Limited-Liability Company |

1. Name Being Registered in Nevada: <small>(See instructions)</small>	Norex LLC																
2. Foreign Entity Name: <small>(Name in home jurisdiction)</small>																	
3. Jurisdiction of Formation: <small>(Foreign Limited-Liability Companies)</small>	3a) Jurisdiction of formation: <input type="text"/> 3b) Date formed: <input type="text"/> 3c) I declare this entity is in good standing in the jurisdiction of its formation. <input type="checkbox"/>																
4. Registered Agent for Service of Process*: <small>(check only one box)</small>	<input type="checkbox"/> Commercial Registered Agent (name only below) <input checked="" type="checkbox"/> Noncommercial Registered Agent (name and address below) <input type="checkbox"/> Office or position with Entity (title and address below) <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> Yevgeniy Grishin </div> Name of Registered Agent OR Title of Office or Position with Entity <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 50%;">4131 Halfmoon Bay Dr</td> <td style="border: 1px solid black; width: 20%;">Las Vegas</td> <td style="border: 1px solid black; width: 10%;">Nevada</td> <td style="border: 1px solid black; width: 20%;">89115</td> </tr> <tr> <td style="font-size: small;">Street Address</td> <td style="font-size: small;">City</td> <td style="font-size: small;">State</td> <td style="font-size: small;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;">Nevada</td> <td style="border: 1px solid black;"> </td> </tr> <tr> <td style="font-size: small;">Mailing Address (If different from street address)</td> <td style="font-size: small;">City</td> <td style="font-size: small;">State</td> <td style="font-size: small;">Zip Code</td> </tr> </table>	4131 Halfmoon Bay Dr	Las Vegas	Nevada	89115	Street Address	City	State	Zip Code			Nevada		Mailing Address (If different from street address)	City	State	Zip Code
4131 Halfmoon Bay Dr	Las Vegas	Nevada	89115														
Street Address	City	State	Zip Code														
		Nevada															
Mailing Address (If different from street address)	City	State	Zip Code														
4a. Certificate of Acceptance of Appointment of Registered Agent:	<i>I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Incorporation, submit a separate signed Registered Agent Acceptance form.</i> X Yevgeniy Grishin 10/08/2025 <small>Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity</small> <small>Date</small>																
5. Management: <small>(Domestic Limited-Liability Companies only)</small>	Company shall be managed by: (check one box) <input type="checkbox"/> Manager(s) OR <input checked="" type="checkbox"/> Member(s)																
6. Name and Address of each Manager(s) or Managing Member(s): <small>(NRS 86 and NRS 86.544, see instructions)</small> Name and Address of the Original Manager(s) and Member(s): <small>(NRS 89, see instructions)</small> <small>IMPORTANT: A certificate from the regulatory board must be submitted showing that each individual is licensed at the time of filing.</small>	1) <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Yevgeniy Grishin</div> <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; width: 50%;">4131 Halfmoon Bay Dr</td> <td style="border: 1px solid black; width: 20%;">Las Vegas</td> <td style="border: 1px solid black; width: 10%;">NV</td> <td style="border: 1px solid black; width: 20%;">89115</td> </tr> <tr> <td style="font-size: small;">Address</td> <td style="font-size: small;">City</td> <td style="font-size: small;">State</td> <td style="font-size: small;">Zip Code</td> </tr> </table>	4131 Halfmoon Bay Dr	Las Vegas	NV	89115	Address	City	State	Zip Code								
4131 Halfmoon Bay Dr	Las Vegas	NV	89115														
Address	City	State	Zip Code														
7. Dissolution Date: <small>(Domestic only)</small>	Latest date upon which the company is to dissolve (if existence is not perpetual): <input type="text"/>																



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**Formation -
 Limited-Liability Company**
 Continued, Page 2

8. Purpose/ Profession to be Practiced: (NRS 89 only)													
9. Series and/or Restricted Limited- Liability Company: (Optional)	Check box if a Series Limited-Liability Company <input type="checkbox"/> Domestic Limited-Liability Company's only: The Limited-Liability Company is a Restricted Limited-Liability Company <input type="checkbox"/>												
10. Records Office: (Foreign Limited-Liability Companies)	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Address</td> <td style="border: none; width: 25%;"></td> <td style="border: none; width: 25%;">City</td> <td style="border: none; width: 25%;">State</td> <td style="border: none; width: 20%;">Zip code</td> </tr> <tr> <td style="border: none;">Country</td> <td colspan="4" style="border: none;"><input style="width: 100%;" type="text"/></td> </tr> </table>	Address		City	State	Zip code	Country	<input style="width: 100%;" type="text"/>					
Address		City	State	Zip code									
Country	<input style="width: 100%;" type="text"/>												
11. Street Address of Principal Office: (Foreign Limited-Liability Companies)	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Address</td> <td style="border: none; width: 25%;"></td> <td style="border: none; width: 25%;">City</td> <td style="border: none; width: 25%;">State</td> <td style="border: none; width: 20%;">Zip code</td> </tr> <tr> <td style="border: none;">Country</td> <td colspan="4" style="border: none;"><input style="width: 100%;" type="text"/></td> </tr> </table>	Address		City	State	Zip code	Country	<input style="width: 100%;" type="text"/>					
Address		City	State	Zip code									
Country	<input style="width: 100%;" type="text"/>												
12. Name, Address and Signature of the Organizer: (NRS 86, NRS 89 -Each Organizer must be a licensed professional.)	<p>*Foreign Limited-Liability Company - In the event the designated Agent for Service of Process resigns and is not replaced or the agent's authority has been revoked or the agent cannot be found or served with exercise of reasonable diligence, then the Secretary of State is hereby appointed as the Agent for Service of Process.</p> <p>I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.</p> <table style="width: 100%; border: none;"> <tr> <td style="border: none;"><input style="width: 60%;" type="text" value="Yevgeniy Grishin"/></td> <td style="border: none;"><input style="width: 30%;" type="text" value="United States"/></td> </tr> <tr> <td style="border: none;">Name</td> <td style="border: none;">Country</td> </tr> <tr> <td style="border: none;"><input style="width: 30%;" type="text" value="4131 Halfmoon Bay Dr"/></td> <td style="border: none;"><input style="width: 20%;" type="text" value="Las Vegas"/></td> <td style="border: none;"><input style="width: 10%;" type="text" value="NV"/></td> <td style="border: none;"><input style="width: 20%;" type="text" value="89115"/></td> </tr> <tr> <td style="border: none;">Address</td> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip/Postal Code</td> </tr> </table> <p>X <u>Yevgeniy Grishin</u> (attach additional page if necessary)</p>	<input style="width: 60%;" type="text" value="Yevgeniy Grishin"/>	<input style="width: 30%;" type="text" value="United States"/>	Name	Country	<input style="width: 30%;" type="text" value="4131 Halfmoon Bay Dr"/>	<input style="width: 20%;" type="text" value="Las Vegas"/>	<input style="width: 10%;" type="text" value="NV"/>	<input style="width: 20%;" type="text" value="89115"/>	Address	City	State	Zip/Postal Code
<input style="width: 60%;" type="text" value="Yevgeniy Grishin"/>	<input style="width: 30%;" type="text" value="United States"/>												
Name	Country												
<input style="width: 30%;" type="text" value="4131 Halfmoon Bay Dr"/>	<input style="width: 20%;" type="text" value="Las Vegas"/>	<input style="width: 10%;" type="text" value="NV"/>	<input style="width: 20%;" type="text" value="89115"/>										
Address	City	State	Zip/Postal Code										
Name and Signature of Manager or Member: (NRS 86.544 only)													
See instructions													

AN INITIAL LIST OF OFFICERS MUST ACCOMPANY THIS FILING

Please include any required or optional information in space below:

(attach additional page(s) if necessary)



FRANCISCO V. AGUILAR
 Secretary of State
 401 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Initial List and State Business License Application

Initial List Of Officers, Managers, Members, General Partners, Managing Partners, or Trustees:

Norex LLC

NAME OF ENTITY

TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT

IMPORTANT: Read instructions before completing and returning this form.

Please indicate the entity type (check only one):

- Corporation
 - This corporation is publicly traded, the Central Index Key number is:
- Nonprofit Corporation (see nonprofit sections below)
- Limited-Liability Company
- Limited Partnership
- Limited-Liability Partnership
- Limited-Liability Limited Partnership (if formed at the same time as the Limited Partnership)
- Business Trust

Filed in the Office of Secretary of State State Of Nevada	Business Number	E52275242025-3
	Filing Number	20255227525
	Filed On	10/08/2025 12:30:47 PM
	Number of Pages	2

Additional Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers, may be listed on a supplemental page.

CHECK ONLY IF APPLICABLE

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee.

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co, provide license or certificate of authority number

For nonprofit entities formed under NRS chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is \$200.00. Those claiming and exemption under 501(c) designation must indicate by checking box below.

Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee.
Exemption Code 002

For nonprofit entities formed under NRS Chapter 81: entities which are Unit-owners' association or Religious, Charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C § 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls under one of these categories by marking the appropriate box. If the entity does not fall under either of these categories please submit \$200.00 for the state business license.

Unit-owners' Association Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. §501(c)

For nonprofit entities formed under NRS Chapter 82 and 80: Charitable Solicitation Information - check applicable box

Does the Organization intend to solicit charitable or tax deductible contributions?

No - no additional form is required

Yes - the *Charitable Solicitation Registration Statement* is required.

The Organization claims exemption pursuant to NRS 82A 210 - the *Exemption From Charitable Solicitation Registration Statement* is required

****Failure to include the required statement form will result in rejection of the filing and could result in late fees.****



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**Initial List and State
 Business License
 Application - Continued**

Officers, Managers, Members, General Partners, Managing Partners or Trustees:

CORPORATION, INDICATE THE Managing Member:

Yevgeniy Grishin	USA
Name	Country
4131 Halfmoon Bay Dr	Las Vegas
Address	City
NV	89115
State	Zip/Postal Code

None of the officers and directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the office of the Secretary of State.

X Yevgeniy Grishin
Signature of Officer, Manager, Managing Member, General Partner, Managing Partner, Trustee, Member, Owner of Business, Partner or Authorized Signer FORM WILL BE RETURNED IF UNSIGNED

Managing Member	10/08/2025
Title	Date

SECRETARY OF STATE



DOMESTIC LIMITED-LIABILITY COMPANY (86) CHARTER

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that **Norex LLC** did, on 10/08/2025, file in this office the original Articles of Organization that said document is now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said document contains all the provisions required by the law of the State of Nevada.



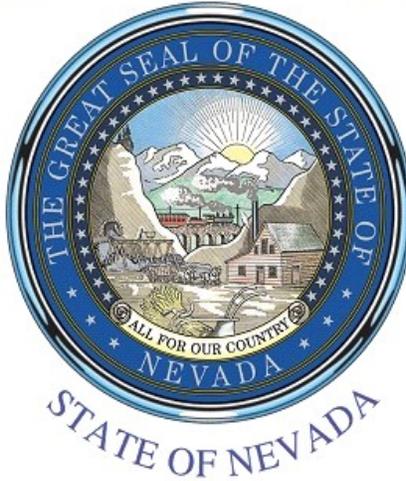
IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 10/08/2025.

A handwritten signature in black ink that reads "F V Aguilar".

FRANCISCO V. AGUILAR
Secretary of State

Certificate
Number: B202510086159611
You may verify this certificate
online at <https://www.nvsilverflume.gov/home>

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

Norex LLC

Nevada Business Identification # NV20253452947

Expiration Date: 10/31/2026

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which, by law, cannot be waived.



Certificate Number: B202510086159612

You may verify this certificate
online at <https://www.nvsilverflume.gov/home>

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 10/08/2025.

FRANCISCO V. AGUILAR
Secretary of State