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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6383

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Account Name : EMPIRE CORPORATE KIT COMPANY
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FLORIDA LIMITED LIABILITY CO.
BALAREZO FAMILY CHIROPRACTIC LLC

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

The Name of the Limited Liability Company shall be :

BALAREZO FAMILY CHIROPRACTIC LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the at.

ARTICLE III

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

6670 TAFT ST.
HOLLYWOOD, FL 33024

ARTICLE IV

The name of the Managing Member and Manager(S) shall be:

MANAGING MEMBER/MANAGER

BENJAMIN C. BALAREZO
555 S LUNA CT #302
HOLLYWOOD, FL 33021

ARTICLE V

The name and Florida street address of the registered agent shall be:

BENJAMIN C. BALAREZO
555 S LUNA CT #302
HOLLYWOOD, FL 33021

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE**

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Agencia de Noticias

2013 年 19 期 AM12-08

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Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

BENJAMIN C. BALAREZO
Typed or printed name signee

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