

LO1000007412

Jason T. Marucci

1856 Opechee Drive
Coconut Grove, FL 33133

305.986.4068

\$100.00 Filing Fee
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy

\$155.00 Total

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FILED
01 MAY 10 PM 11:32
SEC. OF STATE
TALLAH. FL 32304

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HIALEAH INJURY, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

182 E. 49th STREET
HIALEAH, FL 33013

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

MARIA LALDA
Name
4640 NW 102ST
Florida street address (P.O. Box NOT acceptable)
MIAMI FL 33178
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Maria Lalda
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Jason T. Marucci
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.)

Jason T. Marucci
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE