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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| Special Instructions to Filing Officer. |
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| Capitol Services, Inc. | | | | | | | |
|--|------------------------------|---------------|--|--------------------------|--|------------------|--------------|
| 1406 Hays St., Suite 2 | | | | | | | |
| Tallahassee, FL 32301 | (850) 878-47 Kathi or Bre | | | | | | |
| | | | L | Office Use Only | ···· | | - |
| CORPORATION NAM | IE(S) & DOCUM | IENT NU | MBER(S) (| if known): | | | |
| 1. Haleah | P. E. T. Mn. n Name) | ngcene | nt, LU | <u> </u> | | | |
| (Corporation | n Name) | 3 | , | (Document #) | | | |
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| | Pick up time | 12/17 | | Certified Copy | | | |
| □ Mail Out □ | Will wait | □ Phot | осору | ☐ Certificate of Stat | us ≱∽ | 0 | |
| NEW FILINGS Profit Not for Profit Limited Liability Domestication Other | | ☐ Ame ☐ Resig | gnation of R. age of Regist plution/With | • | ELAE JARY OF STATE LLAHASSEE, FLORIDA | 2 DEC 17 PM 1:31 | FILED |
| OTHER FILINGS ☐ Annual Report ☐ Fictitious Name | | □ Forei | gn ted Partnersh statement emark | QUALIFICATION nip | | | |

CR2E031(7/97)

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: HIALEAH P.E.T. MANAGEMENT, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2300 Glades Road, Suite 100-W, Boca Raton, Florida 33431.

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

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

2300 Glades Road, Suite 100-W, Boca Raton, Florida 33431.

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.

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

[x] 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)

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.)

GEORGE MAHONEY, AUTHORIZED PERSON

Typed or printed name of signee