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Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : ARNALDO VELEZ, P.A.

Account Number : 119990000259
Phone : (305)461-9498
Fax Number : (305)461-9498

LIMITED LIABILITY COMPANY

MIAMIAMBULANCE.COM, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

SECRETARY AN 8: 22

\$ 1403

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Page 2/3

ARTICLES OF ORGANIZATION OF LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE 1 -- Name

The name of the Limited Liability Company is: MIAMIAMBULANCE.COM, LLC., a Florida Limited Liability Company.

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is: 13640 S.W. 80 Court, Miami, Figrida 33158.

Article III - Registered Agent and Registered Office

The name and the Florida street address of the initial registered agent is: Jesus Osvaldo Paredes at 13640 S.W. 80 Court, Mismi, Florida 33158.

Article IV — Management (If applicable)

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

Signature of authorized representative

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

Jesus Osyaido Paredes
Typed or printed name of signee

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Page 3/8

STATEMENT ACCEPTING APPOINTMENT AS RECISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

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

Signature of Registered Agent

IESUS OSVALDO PAREDES 13640 S.W. 80 Court Miami, Florida 33158

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