

L03 000004960

Division of Corporations

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To: Division of Corporations
Fax Number : (850) 205-0222

From: Account Name : EMPIRE CORPORATE KIT COMPANY
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LIMITED LIABILITY COMPANY

hsa, LLC.

Certificate of Status	4
Certified Copy	1
Page Count	03
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HSA, L.L.C.

ARTICLE II - Address:

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

5731 NW 98TH WAY
CORAL SPRINGS, FL 33076

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

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

HECTOR VALDIVIESO
5731 NW 98TH WAY
CORAL SPRINGS, FL 33076

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 603, F.S.

Hector Valdivieso

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)

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

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ARTICLE V - Member's Name, Address and Percent of Interest:
Membership Name and Address Percent Interest

HECTOR VALDIVIESO
5731 NW 9TH WAY
CORAL SPRINGS, FL 33076

100%

(In accordance with section 606,408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

HECTOR VALDIVIESO

Typed or printed name of signer

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