L05000012891

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	





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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
IEALING HUMANITY MEDICAL GROUP LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
520 BRICKELL KEY Dr. #1602
MIAMI FL 33131
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
EDUARDO E. DAVILA
520 BRICKELL KEY Dr. #1602 MIAMI FZ 33131
Florida street address (P.O. Box NOT acceptable)
City, State, and Zip
0.1.y, 5.1.1.t 2.1p
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 <u>registered agent as provided for in Chapter 608, F.S.</u>
Clear de Call
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.
MANAGER EDUARDO DAVILA 520 BRICKELL KEX DR. # 1602
MAGRIMAURICIO CHAVEZ, MIAMI FZ 33131
(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.)
EDUARDO E. DAVILA
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)