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CORPORATION NAME (S) AND DOCUMENT NUMBER

ISN Sleep Center of West Palm Beach, LLC

			<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
	Filing Evidence □ Plain/Confirmation Copy	Type of Docume □ Certificate of Sta	
	☑ Certified Copy	□ Certificate of Go	od Standing
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	Retrieval Request Photocopy Certified Copy	☐ All Charter Docu Articles & Amen ☐ Fictitious Name (☐)	dments
	NEW FILINGS	AMENDMENTS	86 2 T
	Profit	Amendment	F. 51
	Non Profit	Resignation of RA Officer/Director	RIGHT
X	Limited Liability	Change of Registered Agent	
	Domestication	Dissolution/Withdrawal	-
L	Other	Merger	
<u></u>	OTHER FILINGS	REGISTRATION/QUALIFICATION	
	Annual Reports	Foreign	
<u></u>	Fictitious Name	Limited Liability	
	Name Reservation	Reinstatement	
L	Reinstatement	Trademark	-

Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	
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The name of the Limited Liability Company is:

ISN Sleep Center of West Palm Beach, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C,"

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

RAJESH GROVER
2541 METROCENTRE BLVD. SUITE 4

WEST PALM BEACH, FLORIDA 33407

RAJESH GROVER
2541 METROCENTRE BLVD. - SUITE 4
WEST PALM BEACH, FLORIDA 33407

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

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

RAJESH GROVER

Name

2541 METROCENTRE BLVD. SUITE 4

Florida street address (P.O. Box NOT acceptable)

WEST PALM BEACH FT. 3346

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MANAGER RAJESH GROVER 2541 METROCENTRE BLVD., - SUITE 4 WEST PALM BEACH, FLORIDA 33407 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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.)

RAJESH GROVER

Typed or printed name of signee