

LD7 000044444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

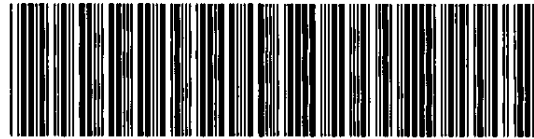
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**LAZARUS
CORPORATE FILING SERVICE**

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. L & AA HEALTH CARE, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

L & A A HEALTH CARE, LLC

ARTICLE II - Address:

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

2793 West 55 Street
Hialeah Florida 33016

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TALLAHASSEE
FLORIDA

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

The name and the Florida street address of the Registered Agent are:

LOURDES HELENA ALVAREZ

LOURDES HELENA ALVAREZ

Name

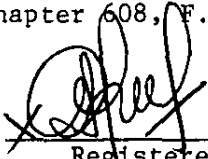
2793 West 55 Street

Florida street address (P O Box NOT Acceptable)

Hialeah Florida 33016

City, State, and Zip Code

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
LOURDES HELENA ALVAREZ

ARTICLE IV - Members:

LOURDES HELENA ALVAREZ
2793 West 55 Street
Hialeah Florida 33016

ARTICLE V - Date:

This Articles of Florida Limited Liability Company to be effective
this 25 day of April of 2007.



Signature of 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.)

LOURDES HELENA ALVAREZ

Typed or printed name of signee