L090000059258

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



000157188770

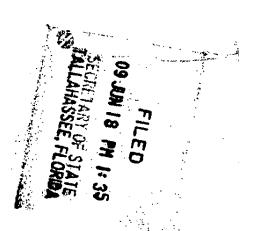
06/18/09--01004--010 **155.00



B. KOHR

JUN 1 8 2009

EXAMINER



LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 5	CHECK THE TOTAL THE	
a service of the conference of		Office Use Only
CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (ii	known):
1. SAVEWAY H (Corporation Name)	ONE H	EALTH ST
2. CARE LLC (Corporation Name)	(Document #)	
3. (Corporation Name)	(Document #)	
4. (Corporation Name)	(Document #)	· .
Walk in Pick up time	2.06	Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of F Change of Regis Dissolution/With Merger	
OTHER FILINGS	REGISTRATION/O	<u>DUALIFICATION</u>
Annual Report Fictitious Name	Foreign Limited Partners Reinstatement Trademark Other	ship
		Evaminar's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name: S The name of the Limited Liabil.	SAVEWAY HOME ity Company is:	HEALT	H CARE LLC	
ARTICLE II- Address: The mailing address and street a	address of the princip	oal office o	f the Limited Liability Con	mpany is:
7184 SW 47th ST., ARTICLE III– Registered Ag	Miami, FL. ent, Registered Off	33155 ice, & Reg	istered Agent's Signatur	e: 4
			₹ ¢# ÷	
The name and the Florida street	address of tho regist	ered agent	are:	
	RAF	AEL DI	AZ X	30 30
		Name		And I
	7104 017	4711 0	_	65 V
	7184 SW 4		I' ox <u>NOT</u> acceptable)	E F
	Tivi Nicole deni	0.0.7 (1)	M 1301 Mod Million	
	<u>Miami</u>	FL	33155	Viet.
		City, State	e, and Zip	
ARTICLE IV_Management (M_The Limited Liability Contherefore, a manager-managed)	Check box if application of the character of the characte	ed Agent's l		and is,
(An	additional article mu	st be added	l if an effective date is requ	uested)
In accordance with section 608.4 attirmation under the penalties of	108 (3), Florida Statu I perjury that the fac	ites, the ex ts stated he	ecution of this document corein are truc.	onstitutes an
(arol)			RAFAEL	DIAZ
Signature of a premiler Manager			Typed or printed r	name of signee
	•		LAZARO	RAMOS
Signature of Thember Manager			Typed or printed r	
- 1 -41			AUGUSTO	O Y RODRIGUEZ
Signature of a member Manager			Typed or printed n	

Signature of a member/Manager

Typed or printed name of signee