Electronic Articles of Organization
For
Florida Limited Liability Company

L15000166506
FILED 8:00 AM
September 30, 2015
Sec. Of State
vherring

Article I

The name of the Limited Liability Company is:

A HEALTHY NATURAL SOLUTIONS LIMITED LIABILITY COMPANY

Article II

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

3113 NW 25 AVE
POMPANO BEACH, FL. 33069

The mailing address of the Limited Liability Company is:

3113 NW 25 AVE
POMPANO BEACH, FL. 33069

Article III

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

MARIA T BEJARANO MRS
6252 N STATE RD 7
APT 202
COCONUT CREEK, FL. 33073

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.

Registered Agent Signature: MARIA TERESA BEJARANO

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Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
MARIA T BEJARANO MRS
6252 N STATE RD 7 APT 202
COCONUT CREEK, FL. 33069

Title: MGR
JOSE E BEJARANO SR
6252 N STATE RD 7 APT 202
COCONUT CRREK, FL. 33069

Article V

The effective date for this Limited Liability Company shall be:

10/01/2015

Signature of member or an authorized representative

Electronic Signature: MARIA TERESA BEJARANO

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.