

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L16000229115  
FILED 8:00 AM  
December 20, 2016  
Sec. Of State  
thampton**

**Article I**

The name of the Limited Liability Company is:  
WINDY CITY RECOVERY, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
17440 NW 19TH AVE.  
MIAMI, FL. 33056

The mailing address of the Limited Liability Company is:  
17440 NW 19TH AVE.  
MIAMI, FL. 33056

**Article III**

The name and Florida street address of the registered agent is:  
ANDREA WILLIAMS  
17440 NW 19TH AVE.  
MIAMI, FL. 33056

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: ANDREA WILLIAMS

## Article IV

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

Title: AMBR  
ANDREA WILLIAMS  
13753 KILDARE  
CRESTWOOD, IL. 60445

Title: AMBR  
CLARICE CARPENTER  
2320 HICKORY ST.  
PORTAGE, IN. 46368

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Signature of member or an authorized representative

Electronic Signature: STEVEN STARK

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.