# Electronic Articles of Organization For Florida Limited Liability Company

L17000113123 FILED 8:00 AM May 22, 2017 Sec. Of State jafason

## **Article I**

The name of the Limited Liability Company is: AVENTURA FAMILY CARE, LLC

#### **Article II**

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

20155 NE 38 CT SUITE 2704 MIAMI, FL. US 33180

The mailing address of the Limited Liability Company is:

20155 NE 38 CT SUITE 2704 MIAMI, FL. US 33180

## **Article III**

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

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL. 32301

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: CINDY LESKI

### **Article IV**

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

Title: AMBR VANESSA V JACOBSON 20155 NE 38 CT SUITE 2704

MIAMI, FL. 33180 US

Signature of member or an authorized representative

Electronic Signature: VANESSA V. JACOBSON

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.

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