

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

L17000193579
FILED 8:00 AM
September 18, 2017
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:

CENTRO CLINICO PADRE PIO LLC

Article II

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

13506 SUMMERPORT VILLAGE PKWY
SUITE 755
WINDERMERE, FL. US 34786

The mailing address of the Limited Liability Company is:

13506 SUMMERPORT VILLAGE PKWY
SUITE 755
WINDERMERE, FL. US 34786

Article III

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

MAURICIO A MACHADO
13506 SUMMERPORT VILLAGE PKWY
SUITE 755
WINDERMERE, FL. 34786

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: MAURICIO MACHADO

Article IV

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

Title: MGR
MAURICIO MACHADO
13506 SUMMERPORT VILLAGE PKWY, SUITE 755
WINDERMERE, FL. 34786 US

Title: MBR
JAIME MACHADO
13506 SUMMERPORT VILLAGE PKWY, SUITE 755
WINDERMERE, FL. 34786 US

Signature of member or an authorized representative

Electronic Signature: MAURICIO MACHADO

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.