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FLORIDA LIMITED LIABILITY CO. DE TORO MARIA A HEALING SPACE L.L.C.

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liebility Company is: (Mint and with the words Timited Liebility Company, "LLC," or "LLC)

De TORO María A Healing Space L. L.C.

## ARTICLE II - Address:

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

20013 Isobar Ave Port charlotte FL 33954 USA

### ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Linbillity. Campany cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

HARIA RUIZ DE TORO

20013 Isobar Ave. Port Charlo Te FL 33954 U.S.A

#### ARTICLE IV-

The name and title of each person authorized to manage and control the Limited Liability Company:

MARIA RUIZ DE TORO(AMBR)

Required Signatures:



Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of periury that the facts stated herein are true. I am aware that any 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.

HARIA RUIZ DE TORO

Typed or printed name of signee

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 as provided for in Chapter, 695, F.S..

Registered Agent's Signature (REQUIRED)