

# L19000303347

Florida Department of State

Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
INTEGRATED COMMUNITY SUPPORT, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

*Effective date:*  
*01/01/2020*

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**  
The name of the Limited Liability Company is:

*Integrated Community Support, LLC*

**ARTICLE II - Address:**  
The mailing address and street address of the principal office of the Limited Liability Company is:

*14221 SW 120 ST, Suite 201, Miami FL 33186*

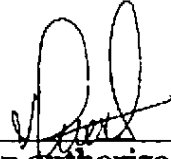
**ARTICLE III - Registered Agent, Registered Office:**  
The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

*Lisset Barral de la Rosa*

*14221 SW 120 ST, Suite 201, Miami FL 33186*

**ARTICLE IV**  
The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

*Lisset Barral de la Rosa (AMBR)*

**Required Signatures:**

\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

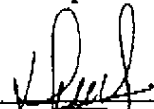
In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.

Lisset Barral de la Rosa

\_\_\_\_\_  
**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 605, F.S..



\_\_\_\_\_  
**Registered Agent's Signature (REQUIRED)**