

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

L21000068893
FILED 8:00 AM
February 09, 2021
Sec. Of State
agent06

Article I

The name of the Limited Liability Company is:

DOCTORS FOR PROVIDERS, LLC.

Article II

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

304 INDIAN TRACE
#884
WESTON, FL. US 33326

The mailing address of the Limited Liability Company is:

304 INDIAN TRACE
#884
WESTON, FL. US 33326

Article III

Other provisions, if any:

ALL BUSINESS IN MEDICINE AND IN HEALTH.

Article IV

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

THE LAW OFFICES OF MAX A ADAMS ESQ PLLC
4929 SW 74TH CT
#5
MIAMI, FL. 33155

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: MAX ADAMS

Article V

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

Title: MGR
DANIEL COUSINS
304 INDIAN TRACE #884
WESTON, FL. 33326 US

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Signature of member or an authorized representative

Electronic Signature: DANIEL COUSINS

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.