

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

L21000200735  
FILED 8:00 AM  
April 29, 2021  
Sec. Of State  
tcline

**Article I**

The name of the Limited Liability Company is:

ENHANCED MEDICAL SOLUTIONS LIMITED LIABILITY COMPANY

**Article II**

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

5029 CASPIAN STREET  
ST CLOUD, FL. UN 34771

The mailing address of the Limited Liability Company is:

5029 CASPIAN STREET  
ST CLOUD, FL. UN 34771

**Article III**

Other provisions, if any:

MEDICAL BILLING AND PRACTICE MANAGEMENT

**Article IV**

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

LEWIS KARUA  
5029 CASPIAN STREET  
ST CLOUD, FL. 34771

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: LEWIS KARUA

## Article V

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

Title: DIR  
LEWIS KARUA  
5029 CASPIAN STREET  
ST CLOUD, FL. 34771 UN

Title: MGR  
ELIZABETH KARUA  
5029 CASPIAN STREET  
ST CLOUD, FL. 34771 UN

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Signature of member or an authorized representative

Electronic Signature: LEWIS KARUA

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.