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# Amended and Restated Articles of Organization For YALDA SAFAI, MD, PLLC

(A Professional Florida Limited Liability Company)

Pursuant to Section 605.0202 of the Florida Revised Limited Liability Act, the undersigned, being the sole member of YALDA SAFAI, MD, LLC (hereinafter "Company"), a Florida Limited Liability Company, and desiring to amend and restate its Articles of Organization, do hereby certify:

FIRST: The Articles of Organization of the Company were filed with the Secretary of State of Florida on July 28, 2021, Document number L21000341493.

**SECOND**: These Amended and Restated Articles of Organization, which supersede the original Article of Organization and all amendments to them, were adopted by the Sole Member of the Company.

**THIRD**: This Professional Service Limited Liability Company is organized under the provisions of Fla. Stat. Chapters 605 and 621 for the purpose of providing such professional services as are hereafter specified. To effect the foregoing, the text of the Articles of Organization is hereby restated and amended as herein set forth in full:

# ARTICLE I

### Name

The name of the Limited Liability Company is: YALDA SAFAI, MD, PLLC (the Company).

### ARTICLE II

#### Address

The mailing address and street address of the principal office of the Company is 3901 NW 79<sup>TH</sup> AVE STE 245, #4637 MIAMI, FL 33166

### ARTICLE III

# Registered Agent, Registered office, & Registered Agent's Signature:

The name and the Florida Street Address of the Registered Agent are:

FLP RA Services, LLC 360 Central Avenue #800 St. Petersburg, FL 33701

(CONTINUED) (Page 1 of 2)

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..

Ada Keyes (sign)

### ARTICLE IV:

### Areas of Practice

The area of professional service of the Company are limited to the practice of medicine.

# ARTICLE IV:

# Management

The Name and Address of each person authorized to manage and control the Professional Limited Liability Company:

Name and Address
Yalda Safai 3901 NW 79 <sup>rii</sup> AVE
STE 245, #4637 MIAMI, FL 33166

# ARTICLE V:

The Effective date shall be the date of filing.

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(sign)

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

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. 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.

Yalda Şafai
Authorized Representative/Member
(Page 2 of 2)

SEURLIARY OF STATE ALLAHASSEE, FLORIDA

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