

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

**L22000388828
FILED 8:00 AM
September 06, 2022
Sec. Of State
jsdennis**

Article I

The name of the Limited Liability Company is:
CELLMAX MEDICAL ASSOCIATES LLC

Article II

The street address of the principal office of the Limited Liability Company is:
17699 NW 78 AVE
HIALEAH, FL. 33015

The mailing address of the Limited Liability Company is:
17699 NW 78 AVE
HIALEAH, FL. 33015

Article III

Other provisions, if any:
ANY LAWFULL BUSINESS PURPOSES

Article IV

The name and Florida street address of the registered agent is:
GONZALEZ & ASSOCIATES III PA
1820 N CORPORATE LAKE BLVD
SUITE 107
WESTON, FL. 33326

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: ANTONIO GONZALEZ

Article V

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

Title: AMBR
CELLMAX MEDICAL GROUP CORP
17699 NW 78 AVE
HIALEAH, FL. 33015

Title: AMBR
YESIRA BASSI
17699 NW 78 AVE
HIALEAH, FL. 33015

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Signature of member or an authorized representative

Electronic Signature: YESIRA BASSI

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.