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**FLORIDA LIMITED LIABILITY CO.
PROFESSIO HEALTH CENTERS, LLC.**

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I-Name:**

The name of the Limited Liability Company is:

PROFESSIO HEALTH CENTERS, L.L.C., Florida Limited Liability Company

ARTICLE II-Address

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


Pedro A. Ariz, Esq.
2103 Coral Way
Suite 800
Miami, Florida 33145

ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature:

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

Pedro A. Ariz, Esq.
2103 Coral Way
Suite 800
Miami, Florida 33145

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 her 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.



Pedro A. Ariz, Esq., Registered Agent

ARTICLE IV-Management

The limited liability company is to be managed by two managers and is, therefore, a manager-managed company.

ARTICLE V- Effective Date: The effective date of this Article of Organization is September 16, 2022.



Pedro A. Ariz, Esq., Authorized Representative

(In accordance with section 605, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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