Electronic Articles of Organization For Florida Limited Liability Company

L22000509875 FILED 8:00 AM December 05, 2022 Sec. Of State kcostello

Article I

The name of the Limited Liability Company is:

ALPHA RECOVERY HOME HEALTH CARE LLC

Article II

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

1007 N FEDERAL HWY 103-198 FT LAUDERDALE, FL. 33304

The mailing address of the Limited Liability Company is:

1007 N FEDERAL HWY 103-198 FT LAUDERDALE, FL. 33304

Article III

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

PRESTON CAIN JR 3840 WEST BROWARD BLVD APT 101 FT LAUDERDALE, FL. 33312

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: PRESTON CAIN JR

Article IV

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

Title: MGR PRESTON CAIN JR 3840 WEST BROWARD BLVD FT LAUDERDALE, FL. 33312 L22000509875 FILED 8:00 AM December 05, 2022 Sec. Of State kcostello

Signature of member or an authorized representative

Electronic Signature: PRESTON CAIN JR

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.