

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

L23000200455
FILED 8:00 AM
April 24, 2023
Sec. Of State
adjohnson

Article I

The name of the Limited Liability Company is:

ONECARE HEALTH PLLC

Article II

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

1750 S VOLUSIA AVE STE1
ORANGE CITY, FL. 32763

The mailing address of the Limited Liability Company is:

1750 S VOLUSIA AVE STE1
ORANGE CITY, FL. 32763

Article III

Other provisions, if any:

HEALTH CARE SERVICE

Article IV

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

JAIME J PEREZ
1750 S VOLUSIA AVE
1
ORANGE CITY, FL. 32763

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: JAIME J PEREZ

Article V

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

Title: AMBR
JAIME J PEREZ
1750 S VOLUSIA AVE STE 1
ORANGE CITY, FL. 32763

Title: MBR
EVELYN G VILLAR
8287 BENT PINE DR APT 1112B
ORLANDO, FL. 32822

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Article VI

The effective date for this Limited Liability Company shall be:

04/21/2023

Signature of member or an authorized representative

Electronic Signature: JAIME J PEREZ

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.