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FLORIDA LIMITED LIABILITY CO.

Soran Health LLC

Certificate of Status	0
Certified Copy	0
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21

ARTICLES OF ORGANIZATION

SORAN HEALTH LLC

A FLORIDA LIMITED LIABILITY COMPANY

(Pursuant to Chapter 605, Florida Statutes)

1. **Name.** The name of the limited liability company is SORAN HEALTH LLC.
2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida, including the acquisition, owning, and operation of a healthcare business.
3. **Address of Principal Office.** The street address of the principal office of the limited liability company is: 18540 SW 43rd ST, HOLLYWOOD, FLORIDA 33029.
4. **Mailing Address.** The mailing address of the limited liability company is:
18540 SW 43rd ST, HOLLYWOOD, FLORIDA 33029.
5. **Management.** The name and address of each person authorized to manage the Limited Liability Company:
Jason Conger, Authorized Member
Address: 18540 SW 43rd ST, HOLLYWOOD, FLORIDA 33029.
6. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida street address of the registered agent is:
Jason Conger, Registered Agent
Address: 18540 SW 43rd ST, HOLLYWOOD, FLORIDA 33029.

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.



Jason Conger
Registered Agent

7. **Effective Date.** The effective date of the limited liability company shall be the date of filing unless otherwise stated below:

Executed this 13th day of July, 2023.

A handwritten signature in black ink that reads "Jason Conger". The signature is written in a cursive, flowing style.

Jason Conger, Authorized Member

(In accordance with section 605.0203(1) (b), Florida Statutes, the execution of this document constitutes under the penalties of perjury that the facts stated herein are true. 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.)