Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000289160 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PGMARES ACCOUNTING SOLUTIONS

Account Number : 120199000043 Phone : (786)314-1371 Fox Number : (786)228-0049

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ahmed 88/3/3@gmail. com

FLORIDA LIMITED LIABILITY CO. POMARES MELTAL HEALTH LLC

H

Certificate of Status	()
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Monu — Corporate Filing Menu

Help

H 23000289160 3

ARTICLES OF ORGANIZATIONS

OF

POMARES MENTAL HEALTH, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Act, Florida Statutes charter 605, hereby makes, acknowledges, and files the following Articles of Organization:

Name:

The name of the Limited Liability Company is POMARES MENTAL HEALTH, LLC

Principal Office and Mailing Address:

The physical and mailing address of The Limited Liability Company is: 7200 NW 177 ST, Hialeah Florida 33015

Purpose

The general purpose for which the company is organized is to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the power granted to a limited liability company under the laws of The State of Florida.

Manager-Managed

The manager-managed is Ahmed J. Pomares Avalus, with mailing address: 7200 NW 177 ST, Hialeah Florida 33015

Pomares Accounting Solutions, LLC 3425 Northwest 14th Street, Miami, Florida 33125 Ph. (786) 314.1371 Fax. (786) 228.0049

H 23000289160 3

Registered Agent

The name and the Florida street address of the registered agent are POMARES ACCOUNTING SOLUTIONS, LLC.; 3425 NW 14TH ST MIAMI, FL 33125

Having been named as registered agent and to accept services of process for the above corporation 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 Charter 605. F.S.

Effective Date

These Articles of Incorporation is effective on August 21, 2023.

By: Pomares Accounting Solutions, ELC

Ivon Pomares

As Registered Agent and Authorized Representative

2023 AUG 21 AH 1: 4

TÁLL AGGGŠÉ TTÍ ÖPP