Electronic Articles of Organization For Florida Limited Liability Company

L23000487921 FILED 8:00 AM October 25, 2023 Sec. Of State tscott

Article I

The name of the Limited Liability Company is: HEALTH WISE SOLUTION L.L.C.

Article II

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

4474 WESTIN RD 210 DAVIE, FL. 33331

The mailing address of the Limited Liability Company is:

4474 WESTIN RD 210 DAVIE, FL. 33331

Article III

Other provisions, if any:

MEDICAL SUPPLY SALES. PPE SALES

Article IV

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

ELI HALAVA 4474 WESTON RD 210 DAVIE, FL. 33331

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: ELI HALAVA

Article V

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

Title: MGR ELI HALAVA 4474 WESTON RD DAVIE, FL. 33331

Title: MGR JAIR ALBARRACIN 4474 WESTON RD DAVIE, FL. 33331 L23000487921 FILED 8:00 AM October 25, 2023 Sec. Of State tscott

Signature of member or an authorized representative

Electronic Signature: ELI HALAVA

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.