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

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To:	Division of Corporation				
	Fax Number : (850))617-6381			
From:					
	Account Name : LAZAF Account Number : 12006 Phone : (305) Fax Number : (305)	000000 19)552- 5 973	ING SERVICE, I	INC.	
	annual report mailings.		email address	ed for f please.*	future * -
	Email Address: FLORIDA L	Enter only one o	BILITY CO.	ed for f please.*	future * -
	Email Address: FLORIDA L	Enter only one e	BILITY CO.	ed for f please.*	future * -
	Email Address: FLORIDA L	Enter only one of	BILITY CO.	ed for f please.*	future * -
	FLORIDA L SOMOS VI Certificate of Status Certified Copy	Enter only one of	BILITY CO.	ed for f please.*	future * -
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	FLORIDA L SOMOS VI Certificate of Status Certified Copy Page Count	Enter only one of	BILITY CO. ICES LLC 1 0 03	ed for f	future * -

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Somos Vida ABA Services ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
<u>4910 E 2 aue</u>
Haleah FL 33013
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
4910 E 2 aug
Haleah Fl 33013
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
2. 2
Judith Pando (AMBR)
Lourdes Esther Martine 28
(AMBQ)

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts states 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.

Typed or printed name of signee

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..

Registered Agent's Signature (REQUIRED)

2023 NO. 13 AT 5: 50