# Electronic Articles of Organization For Florida Limited Liability Company

L24000043833 FILED 8:00 AM January 23, 2024 Sec. Of State jgharris

## **Article I**

The name of the Limited Liability Company is: INJURY PHYSICIANS NETWORK LLC

#### **Article II**

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

13911 SW 42 ST 202 MIAMI, FL. US 33175

The mailing address of the Limited Liability Company is:

13911 SW 42 ST SUITE 202 MIAMI, FL. US 33175

## **Article III**

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

JASON CASTELLANOS 13911 SW 42 ST SUITE 202 MIAMI, FLORIDA, FL. 33175

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: JASON CASTELLANOS

### **Article IV**

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

Title: AMBR JASON D CASTELLANOS 13911 SW 42 ST SUITE 202 MIAMI, FL. 33175 US

Title: AMBR GUSTAVO MARSHALL 13911 SW 42 ST SUITE 202

MIAMI, FL. 33175 US

Signature of member or an authorized representative

Electronic Signature: JASON CASTELLANOS

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.

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