

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L24000234313
FILED 8:00 AM
May 20, 2024
Sec. Of State
klovelace**

Article I

The name of the Limited Liability Company is:

HEGO GROUP INSURANCE LLC

Article II

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

2950 SW 115TH AVE
MIAMI, FL. UN 33165

The mailing address of the Limited Liability Company is:

2950 SW 115TH AVE
MIAMI, FL. UN 33165

Article III

Other provisions, if any:

INSURANCE AGENCY.

Article IV

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

YOSVAN HERNANDEZ SIMON
2950 SW 115TH AVE
MIAMI, FL. 33165

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: YOSVAN HERNANDEZ SIMON

Article V

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

Title: P
CARLA R GOMEZ
2950 SW 115TH AVE
MIAMI, FL. 33165

Title: P
YOSVAN HERNANDEZ SIMON
15455 SW 75TH CIRCLE LN #203
MIAMI, FL. 33193

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Article VI

The effective date for this Limited Liability Company shall be:

05/20/2024

Signature of member or an authorized representative

Electronic Signature: YOSVAN HERNANDEZ SIMON

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.