

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

**L24000297842
FILED 8:00 AM
July 02, 2024
Sec. Of State
dsultana**

Article I

The name of the Limited Liability Company is:
CURELINK MEDICAL SOLUTIONS LLC

Article II

The street address of the principal office of the Limited Liability Company is:
12801 W SUNRISE BLVD TT 163
SUNRISE, FL. US 33323

The mailing address of the Limited Liability Company is:
7960 NW 4TH PL
PLANTATION, FL. US 33324

Article III

The name and Florida street address of the registered agent is:
DANIEL BEN- ARI
12801 W SUNRISE BLVD TT 163
SUNRISE, FL. 33323

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: DANIEL BEN- ARI

Article IV

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

Title: AMBR
DANIEL BEN- ARI
17221 NW 94TH CT APT 215
MIAMI LAKES, FL. 33018 US

Title: AMBR
STAV BEN JOSEPH
7960 NW 4TH PL
PLANTATION, FL. 33324 US

Signature of member or an authorized representative

Electronic Signature: DANIEL BEN- ARI

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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