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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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Email Address:_

FLORIDA LIMITED LIABILITY CO. BUSYBEES AHS, LLC

Certificate of Status	1
Certified Copy	0
Page Count	0.3
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Jul. 18. 2024 2:43PM

No. 0669 P. 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<u>ARTICLE I - Name</u>	:
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The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "LLC," or "LIC.")

Busy Bees AHS, LLC

ARTICLE II - Address:

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

3095 S. military Trail Unit 业4. Lakeworth FL 33463

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.)

Haribel loyala Pacheco 3095 S. Military Trail Unite #4.

lakeworth FL 33463

ARTICLE IV-

The name and title of each person authorized to manage and control the Limited Liability Company:

AMBR. Maribel Loyda Pachecio.

SECRETARY OF JAME VISIONS TO THOUSE

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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 stated 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 piace 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 60g, F.S..

Registered Agent's Signature (REQUIRED)