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To: Department Of State, Division Of Corporations From: Amanda Miller Ext: x62969 Date: 08/27/24 Order #: 1603978-1 Re: MYSPOT HOME HEALTH, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find: Certificate of Formation/Incorporation Amount to be deducted from our State Account: \$125.00 - FL State Account Number: 120000000195

Please take the following action: File in your office on basis Issue Proof of Filing

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Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ARTICLES OF ORGANIZATION OF MYSPOT HOME HEALTH, LLC

The undersigned, being a duly authorized representative of the Member, desiring to form a limited liability company under and pursuant to the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes (the "Act"), does hereby adopt the following Articles of Organization:

ARTICLE I. NAME

The name of the limited liability company is MySpot Home Health, LLC (the Comp Sy"). <u>ARTICLE II. ADDRESS</u> The principal and mailing address office of the Company is 1515 Sunset Drive Suite 32, Miami, FL 33143. <u>ARTICLE III. REGISTERED AGENT AND OFFICE</u>

The Company designates 1201 Hays Street, Tallahassee, FL 32301 as the street address of the initial registered office of the Company and names Corporation Service Company as the Company's initial registered agent at that address to accept service of process within this state.

ARTICLE IV. DURATION AND CONTINUATION

The period of the Company's duration shall commence with the filing of these Articles of Organization with the Secretary of State, and shall continue perpetually, unless terminated in accordance with the Company's Operating Agreement or pursuant to the Act, as amended from time to time.

ARTICLE V. MANAGEMENT

The Company shall be conducted, carried on, and managed by its Member, and is, therefore, a member-managed Company.

ARTICLE VI. PURPOSE

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida including activities within the United States and abroad.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal this 27th of August, 2024.

/s/ Jordan Taylor

Jordan Taylor, Duly Authorized Representative of the Member

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ACCEPTANCE OF REGISTERED AGENT

The undersigned agrees to act as registered agent for MySpot Home Health, Lecto accept service of process at the place designated in these Articles of Organization, and to comply with the provisions of Chapter 605, Florida Statutes, and acknowledges that the undersigned is familiar with, and accepts, the obligations of such position on this 27th day of August, 2024.

Corporation Service Company

/s/ Doreen S. Haeselin

By:__

Name: Doreen S. Haeselin Title: Authorized Person

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