

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

**L24000478358  
FILED 8:00 AM  
November 12, 2024  
Sec. Of State  
tjhowell**

**Article I**

The name of the Limited Liability Company is:  
SHIBE ANESTHESIOLOGY, PLLC.

**Article II**

The street address of the principal office of the Limited Liability Company is:  
7039 TALAMORE DR  
WESLEY CHAPEL, FL. US 33545

The mailing address of the Limited Liability Company is:  
7039 TALAMORE DR  
WESLEY CHAPEL, FL. US 33545

**Article III**

Other provisions, if any:  
ALL BUSINESS IN MEDICINE AND IN HEALTH

**Article IV**

The name and Florida street address of the registered agent is:  
THE LAW OFFICES OF MAX A ADAMS ESQ PLLC  
4929 SW 74TH CT  
1ST FL  
MIAMI, FL. 33155

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: MAX ADAMS

## **Article V**

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

Title: MGR  
AARON M HANSON  
7039 TALAMORE DR  
WESLEY CHAPEL, FL. 33545 US

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Signature of member or an authorized representative

Electronic Signature: MAX ADAMS

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.