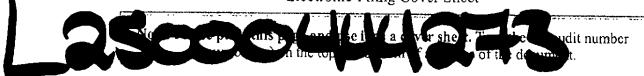
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Division of Corporations

Florida Department of State

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FLORIDA LIMITED LIABILITY CO. MIEL AESTHETIC MED SPA LLC

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Help

To:

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:		
Miel Aesthetic Med Spa		111111111111111111111111111111111111111	WILCH WICH
(Must conta	in the words "Limited	Liability Compan	y, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal c	office of the Limit	ed Liability Company is:
Princips	l Office Address:		Mailing Address:
14058 SW 40 Terrace		14	058 SW 40 Terrace
Miaml, FL 33175		М	iami, FL 33175
•	Georgina Blanco, PA 10261 Sunset Dr., Suite Florida street addres		*uscantable)
•	Florida su cet addres	3 (1 ,O, DOA <u>1707 1</u>	, accoptante)
	Miami City	FL State	33173
place designated in this certificate, further agree to comply with the pro-	gent and to accept serv I hereby accept the app ovisions of all statutes r ligations of my position	ice of process for i ointment as regist elating to the prop as registered ager	Zip the above stated limited liability company at the level agent and agree to act in this capacity. It per and complete performance of my duties, and not as provided for in Chapter 605, F.S

ARTICL	C	ΙV	_
Th	_		_

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR — Ivianagei	Milens de la Caridad Gonzalez	
more .	14058 SW 40 Ter.	
	Miami, FL 33175	
	· · · · · · · · · · · · · · · · · · ·	
		
ective date is listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 day	's a
of filing.) f the date inserted in this block does not ment's effective date on the Department	meet the applicable statutory filing requirements, this date will not be tof State's records.	list
BVI: Other provisions, if any.	. 1	
		_ _
REQUIRED SIGNATURE:	ralez (Sep 26, 2025 04:44:39 E0T)	,
	ember or an authorized representative of a member,	
This document is execu	ated in accordance with section 605.0203 (1) (b), Florida Statutes.	í
I am aware that any fals	c information submitted in a document to the Department of State	
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