

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : RCA ACCOUNTING SERVICES CORP

Account Number : 120180000102

Phone : (305)799-7633

Fax Number : (305)564-6857

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO.
CENTRO OSTEOVAL LLC

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Help

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

Article I

The name of the Limited Liability Company is:
CENTRO OSTEOVAL LLC

Article II

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

**5685 NW 84TH AVE SUITE 10
DORAL, FL 33166**

The mailing address of Limited Liability Company is:

**5685 NW 84TH AVE SUITE 10
DORAL, FL 33166**

Article III

Other provisions, if any:

ANY AND ALL LAWFUL BUSINESS

Article IV

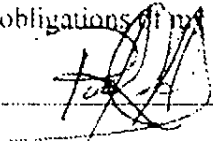
The name and Florida street address of the registered agent is:

**RCA ACCOUNTING SERVICES CORP
8180 NW 36TH ST 409-A
MIAMI, FL 33166**

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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: _____



Article V

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

Title: **MANAGER**
VALENTINA PRESTATO CASCARANO
5685 NW 84TH AVE SUITE 10
DORAL, FL 33166

Title: **MANAGER**
FELICETTA CASCARANO INDORATO
5685 NW 84TH AVE SUITE 10
DORAL, FL 33166

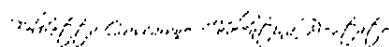
Title: **MANAGER**
FRANCESCO GIUSEPPE CASCARANO OROZCO
5685 NW 84TH AVE SUITE 10
DORAL, FL 33166

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Article VI

The effective date for this Limited Liability Company shall be:

Signature of member or an authorized representative



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.