

2014 23:52 3/22/2014 LAZARUS CORPORATION  
L250000079851  
Florida Department of State

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H2500070391 3)))



H250000703913ABC.

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I2000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
MED PA SOLUTIONS LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED

17:4 Hd 428335202

—

Electronic Filing Menu

Corporate Filing Menu

Help

U.S. DEPARTMENT OF STATE  
OFFICE OF THE ASSISTANT SECRETARY FOR  
INTEGRATION AND SPECIAL INVESTIGATIONS

2025 FEB 24 PM 9:51

FILED

**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "LLC," or "LLC.")*

MED PA SOLUTIONS LLC

**ARTICLE II - Address:**

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

13727 SW 152TH STREET #728

MIAMI FL 33177

**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.)*

RAYSY CASTILLO

13727 SW 152TH STREET #728

MIAMI FL 33177

**ARTICLE IV-**

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

RAYSY CASTILLO ( AMBR)

FILED  
2015 FEB 24 PM 9:51  
CLERK OF DISTRICT COURT  
JANESSEE

**Required Signatures:**

*RAYSY CASTILLO*

**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.

RAYSY CASTILLO

**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 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 as provided for in Chapter 605, F.S..

*RAYSY CASTILLO*

**Registered Agent's Signature (REQUIRED)**