

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

L25000109773  
FILED 8:00 AM  
March 05, 2025  
Sec. Of State  
vherring

**Article I**

The name of the Limited Liability Company is:

SILVIA ARONSON BODY PSYCHOTHERAPY, LLC

**Article II**

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

2695 SOUTH LE JEUNE ROAD  
202  
CORAL GABLES, FL. US 33134

The mailing address of the Limited Liability Company is:

11263 NW 53 LANE  
DORAL, FL. US 33178

**Article III**

Other provisions, if any:

THERAPY SERVICES

**Article IV**

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

SILVIA ARONSON  
11263 NW 53 LANE  
DORAL, FL. 33178

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: SILVIA ARONSON

## **Article V**

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

Title: MGR  
SILVIA ARONSON  
11263 NW 53 LANE  
DORAL, FL. 33178

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Signature of member or an authorized representative

Electronic Signature: SILVIA ARONSON

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.