

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

L25000165630  
FILED 8:00 AM  
April 07, 2025  
Sec. Of State  
tjhowell

**Article I**

The name of the Limited Liability Company is:  
OMI CARE TRANSPORT LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
320 W 20TH ST APT 3  
HIALEAH, FL. US 33010

The mailing address of the Limited Liability Company is:  
320 W 20TH ST APT 3  
HIALEAH, FL. US 33010

**Article III**

The name and Florida street address of the registered agent is:  
ENTITY PROTECT RA SERVICES LLC  
625 E TWIGGS ST. STE 110-A  
TAMPA, FL. 33602

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: ELIAV BOARON

## Article IV

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

Title: AMBR  
JESSICA PEREZ  
320 WEST 20TH STREET APT 3  
HIALEAH, FL. 33010 US

Title: AMBR  
LAZARO PEREZ  
383 EAST 4TH STREET APT 205  
HIALEAH, FL. 33010 US

Title: AMBR  
OMAR BETANCOURT  
320 WEST 20TH STREET APT 3  
HIALEAH, FL. 33010 US

Signature of member or an authorized representative

Electronic Signature: JESSICA PEREZ

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.