

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

**L25000232107  
FILED 8:00 AM  
May 15, 2025  
Sec. Of State  
mkanderson**

**Article I**

The name of the Limited Liability Company is:

VITALPRO INSURANCE LLC

**Article II**

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

8400 NW 33RD ST  
310  
DORAL, FL. 33122

The mailing address of the Limited Liability Company is:

8400 NW 33RD ST  
310  
DORAL, FL. 33122

**Article III**

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

ONLY INSURANCE LLC  
8241 SW 30TH ST  
MIAMI, FL. 33155

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: LUIS BOCARANDA

### **Article IV**

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

Title: MGR  
ONLY INSURANCE LLC  
8241 SW 30TH ST  
MIAMI, FL. 33155

Title: MGR  
EJ INSURANCE LLC  
7280 NW 114TH AVE APT #301  
DORAL, FL. 33178

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### **Article V**

The effective date for this Limited Liability Company shall be:

05/15/2025

Signature of member or an authorized representative

Electronic Signature: LUIS BOCARANDA

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.