

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

**L25000242905
FILED 8:00 AM
May 22, 2025
Sec. Of State
klovelace**

Article I

The name of the Limited Liability Company is:

LEE PHAN PLLC

Article II

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

5155 S UNIVERSITY DR
FORT LAUDERDALE, FL. US 33328

The mailing address of the Limited Liability Company is:

5155 S UNIVERSITY DR
FORT LAUDERDALE, FL. US 33328

Article III

Other provisions, if any:

THE SOLE AND SPECIFIC PURPOSE FOR WHICH THE PROFESSIONAL
LLC IS ORGANIZED IS TO RENDER THE PROFESSIONAL SERVICE OF
MEDICAL PRACTICE, ESTABLISHMENT PRACTICING IN
INTERVENTIONAL CARDIOLOGY.

Article IV

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

LEE N PHAM
5155 S UNIVERSITY DR
DAVIE, FL. 33328

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: LEE NGUYEN PHAM

Article V

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

Title: AMBR
LEE N PHAM
5155 S UNIVERSITY DR
FORT LAUDERDALE, FL. 33328 US

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Signature of member or an authorized representative

Electronic Signature: LEE NGUYEN PHAM

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.