ARTICLES OF ORGANIZATION

Corporation Division
sos.oregon.gov/business

E-FILED
Aug 25, 2025
OREGON SECRETARY OF STATE

REGISTRY NUMBER

245961297

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

1. ENTITY NAME

CENTER FOR VEIN RESTORATION (OR), LLC

2. MAILING ADDRESS

2200 NE NEFF RD SUITE 204
BEND OR 97701 USA

3. PRINCIPAL PLACE OF BUSINESS

2200 NE NEFF RD SUITE 204
BEND OR 97701 USA

4. NAME & ADDRESS OF REGISTERED AGENT

15872088 - CORPORATION SERVICE COMPANY

1127 BROADWAY STREET NE SUITE 310
SALEM OR 97301 USA

5. ORGANIZERS

YOOSON SANDY LEE

PAUL HASTINGS LLP
200 PARK AVENUE
NEW YORK NY 10166 USA

6. INDIVIDUALS WITH DIRECT KNOWLEDGE

KHANH NGUYEN DO

2200 NE NEFF RD SUITE 204
BEND OR 97701 USA

7. INITIAL MEMBERS/MANAGERS

MEMBER

KHANH NGUYEN DO

2200 NE NEFF RD SUITE 204
BEND OR 97701 USA

8. DURATION

PERPETUAL

PUBLIC

9. MANAGEMENT

This Limited Liability Company will be member-managed by one or more members

I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, managers, members or agents of the limited liability company on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

ELECTRONIC SIGNATURE

NAME

YOOSON SANDY LEE

TITLE

ORGANIZER

DATE

08-25-2025