

L18000118535

Division of Corporations

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To: Division of Corporations
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From: Account Name : BAND LAW GROUP, PL.
Account Number : 12009000020
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FLORIDA LIMITED LIABILITY CO. CALLAMORE MEDICAL BILLING, LLC

Certificate of Status	0
Certified Copy	1
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TALLAHASSEE, FLORIDA**

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ARTICLES OF ORGANIZATION

CALLAMORE MEDICAL BILLING, LLC

a Florida limited liability company

**ARTICLE I
NAME**

The business and affairs of the Limited Liability Company shall be conducted under the name of:

CALLAMORE MEDICAL BILLING, LLC

**ARTICLE II
PRINCIPAL OFFICE**

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

5911 N. Honore Avenue, Suite 210
Sarasota, FL 34243

**ARTICLE III
INITIAL REGISTERED AGENT/OFFICE**

The registered office of the Limited Liability Company and its initial registered agent shall be:

Thomas J. Sidgmore
5911 N. Honore Avenue, Suite 210
Sarasota, FL 34243

**ARTICLE IV
EFFECTIVE DATE**

The effective date of filing of these Articles of Organization is May 14, 2018.

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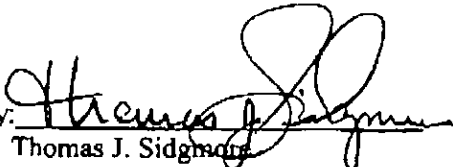
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ARTICLE V
MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations or Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the 10th day of MAY, 2018.

By: 
Thomas J. Sidgmore

"AUTHORIZED REPRESENTATIVE"

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

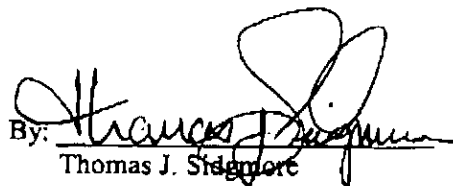
Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

- 1. The name of the Limited Liability Company is:
CALLAMORE MEDICAL BILLING, LLC
- 2. The name and the Florida street address of the registered agent is:
Thomas J. Sidgmore
5911 N. Honore Avenue, Suite 210
Sarasota, FL 34243

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Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: 
Thomas J. Sidgmore

"REGISTERED AGENT"

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