

L1900051153

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To: Division of Corporations
Fax Number : (850)617-6381
From: Account Name : FASTKIT CORP
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Email Address:

19 FEB 27 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
Ascent Medical, LLC

Table with 2 columns: Item and Value. Rows include Certificate of Status (0), Certified Copy (1), Page Count (01), and Estimated Charge (\$155.00).

FEB 28 2019
C Kinse

ARTICLES OF ORIGATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is: **Ascent Medical, LLC**

ARTICLE II PHYSICAL AND MAILING OFFICE ADDRESS

The physical place of business and mailing address is:

Physical Address:
637 79th Circle South
St. Petersburg, FL 33707

ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature:

The name and Florida Street address of the initial registered agent is:

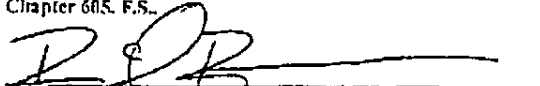
Raul Pou
637 79th Circle South
St. Petersburg, FL 33707

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 FEB 27 AM 10:31

ED

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 as provided for in Chapter 605, F.S.


Signature/Registered Agent

2/25/19
Date

ARTICLE IV Manager(s)

The name, title and address of each person authorized to manage and control the Limited Liability Company:

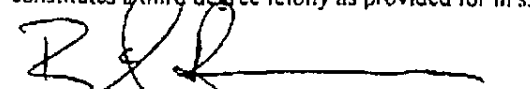
Raul Pou -- Manager
637 79th Circle South
St. Petersburg, FL 33707

ARTICLE V EFFECTIVE DATE

The effective date of this filing:

Immediately upon filing

Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)


Signature/Incorporator/MGR.

2/25/19
Date

Raul Pou
Printed name of Signee