

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

**L21000115559
FILED 8:00 AM
March 10, 2021
Sec. Of State
jsdennis**

Article I

The name of the Limited Liability Company is:
NEUROLOGIC CARE ASSOCIATES, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:
28420 BONITA CROSSING BOULEVARD
SUITE 100 AND 110
BONITA SPRINGS, FL. 34134

The mailing address of the Limited Liability Company is:
19057 AQUA SHORE DRIVE
FORT MYERS, FL. 33913

Article III

The name and Florida street address of the registered agent is:
DONALD M MCCARREN
19057 AQUA SHORE DRIVE
FORT MYERS, FL. 33913

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: DONALD MCCARREN

Article IV

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

Title: AP
SARAH MCCARREN
19057 AQUA SHORE DRIVE
FORT MYERS, FL. 33913

Title: MGR
DONALD MCCARREN
19057 AQUA SHORE DRIVE
FORT MYERS, FL. 33913

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Article V

The effective date for this Limited Liability Company shall be:

03/10/2021

Signature of member or an authorized representative

Electronic Signature: DONALD MCCARREN

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.