Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations

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FORETARY OF STATE

FLORIDA LIMITED LIABILITY CO. SUNNY MEDICAL CENTER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

of 2

May 27, 2015

FLORIDA DEPARTMENT OF STATE Division of Corporations

FASTKIT

SUBJECT: SUNNY MEDICALCENTER, LLC

REF: W15000037076

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H15000126194 Letter Number: 715A00011041

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SECRETAIN OF STATE
TALLAHASSEE, FLORIO

P.O BOX 6327 - Tallahassee, Florida 32314

2015 MAY 27 AN 8: 41

SECRETARY OF STATES
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

SUNNY MEDICAL CENTER, LLC

The undersigned hereby execute these Articles for the purpose of forming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. The undersigned further declares that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company (the "Company").

ARTICLE I: NAME

The name of the Company shall be SUNNY MEDICAL CENTER, LLC

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the Limited Liability Company shall be 17070 Collins Avenue, Ste 257, Sunny Isles Beach, FL 33160.

ARTICLE III: PURPOSE OF LIMITED LIABILITY COMPANY

This Limited Liability Company may engage or transact in any or all lawful activities or business permitted under Laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Alexey Muzyka 17070 Collins Avenue, Ste 257 Sunny Isles Beach, FL 33160

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.

Registered Agent's Signature

ARTICLE V: Manager(s) or Managing Member(s):

The name and address of managing member/manager is:

Alexey Muzyka
17070 Collins Avenue, Ste 257
Sunny Isles Beach, FL 33160

The undersigned, being the original member of the Company, hereby certifies that the foregoing constitutes the Articles of SUNNY MEDICAL CENTER, LLC.

Executed by the undersigned on May 26, 2015.

Signature of a member of an authorized representative of a member