

FEB-23-00

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DM BUSINESS SERVICES

P 1/03 F-9

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 922-4003

From:

Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (608) 827-5300  
Fax Number : (608) 827-5501

00 FEB 23 PM 12:00

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

Folds Medical, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED

00 FEB 23 AM 10:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*H000000080697*  
**ARTICLES OF ORGANIZATION  
OF: Folds Medical, LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: Folds Medical, LLC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 3300 Christiansted Dr., Alford, FL 32420

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Business Filings Incorporated, 1 East Broward Blvd., Suite 700, Ft. Lauderdale, FL 33301. Located in the County of Broward.

**ARTICLE IV DURATION**

The duration for the limited liability company shall be: 12/31/2040.

**ARTICLE V MEMBERS**

The limited liability company will be managed by managers. The names and addresses of the initial members are:

Albert Folds, 3300 Christiansted Dr., Alford, FL 32420  
Fennings Trust, 3300 Christiansted Dr., Alford, FL 32420

*RFO*  
Prepared by Richard Oster, 8025 Excelsior Dr., Suite 200, Madison, WI 53717.  
(608) 827-5300

00 FEB 23 PM 12:00  
DIVISION OF REVENUE  
CLERK OF THE CIRCUIT COURT

*H000000080697*

FEB-23-00 10:03

FROM-BUSINESS SERVICES

T-625 P.03/03 F-842

**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**


PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,  
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

The name of the limited liability company is: **Folds Medical, LLC**

The name and address of the registered agent and office is: Business Filings Incorporated,  
1 East Broward Blvd., Suite 700, Fort Lauderdale, FL 33301

Having been named as registered agent and to accept service of process for the above  
stated corporation 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.

Signature: \_\_\_\_\_

  
Richard Oster, Vice President  
Business Filings Incorporated

Date: 2-23-00

00 FEB 23 PM 12:00

STATE OF FLORIDA  
DIVISION OF CORPORATIONS