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Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To:

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From:

Account Name : STEEL HECTOR & DAVIS

Account Number : 071541002004

Phone : (305)577-4726

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AL

LIMITED LIABILITY COMPANY

ADVANCED REIMBURSEMENT STRATEGIES II, LLC

Certificate of Status	0
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Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ADVANCED REIMBURSEMENT STRATEGIES II, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

633 Crooked Pine Court
Apopka, Florida 32712

ARTICLE III - Registered Agent, Registered Office, and Registered Agent's Signature:

The name and address of the registered agent and office is:

Peninsula Registered Agents

(Name)

200 South Biscayne Boulevard, Suite 4300

Florida street address (P.O. Box NOT acceptable)

Miami, FL 33131

(City, State, and Zip)

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 608, F.S.,

Peninsula Registered Agents, Inc.

By:

Debra Palmisano, Vice President

(Registered Agent's Signature)

Debra Palmisano, For and on behalf of

PENINSULA REGISTERED AGENTS, INC.

(Registered Agent's Printed Name)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE IV - Management (Check box if applicable).

☐ The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

JLA Associates, Inc., Member

By:

James L. Adams
Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

James L. Adams, President of JLA Associates, Inc., Member
(Typed or printed name of signee)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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