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July 14, 2002

Diabetes Education Sources, LLC  
5824 Bee Ridge Rd., #414  
Sarasota, FL 34233

300006488053--4  
-07/18/02--01062--003  
\*\*\*\*160.00 \*\*\*\*160.00

Florida Dept. of State  
Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

To the Florida Department of State:

Enclosed is an application for registration of Diabetes Education Sources as a Limited Liability Corporation in the state of Florida. Also enclosed is a check in the amount of \$160.00 to cover total expenses for filing fees, designation of Registered Agent, Certified Copy, and Certificate of Status.

If there are any questions please call 941-923-2608 or write to us at the address above.

Thank you for your assistance.

Sincerely,

*Bonita Peters*

Bonita Peters, Managing Agent  
Diabetes Education Sources, LLC  
5824 Bee Ridge Rd., # 414  
Sarasota, FL 34233  
blprncde@aol.com  
941-923-2608

FILED  
02 JUL 18 AM 10:33  
TALLAHASSEE, FLORIDA

7/19  
*[Signature]*

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

DIABETES EDUCATION SOURCES, LLC

## ARTICLE II - Address:

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

5824 BEE RIDGE RD, # 414

SARASOTA, FL 34238

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

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

Bonita Peters  
Name  
4824 Benchmark Ct  
Florida street address (P.O. Box **NOT** acceptable)  
Sarasota FL 34238  
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..

Bonita L. Peters  
Registered Agent's Signature

## 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.

(An additional article must be added if an effective date is requested)

Bonita L. Peters  
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.)

Bonita L. Peters  
Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

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02 JUL 18 AM 10:38  
TALLAHASSEE, FLORIDA