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Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

SLEEP DISORDERS OF AMERICA, LLC

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

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ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY



ARTICLE I - Names

The name of the Limited Liability Company is:

SLEEP DISORDERS OF AMERICA, LLC

ARTICLE II - Address:

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

576 WEST PROSPECT ROAD FORT LAUDERDALE, PL 33309

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

the section of the Party	we reflected transference and statement as a sufficient and to the statement	S
The name and the Florida	street address of the registered agent are:	是皇 五
	BRENT PARDETTE	影力的
	676 WEST PROSPECT ROAD	SERIES E
	Fiorida street suddress (P.O. Box NOT acceptable) FT - LAUDERDALE FL 33309	700
	City, State, and Zip	ROLO
•• • •		

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 stantes 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..

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)
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.)

BRENT PARDETTE -

Typed of painted name of signee

Filing Foot:
\$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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