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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
NHC HealthCare/Orlando, LLC
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:
100 Vine Street, Suite 1400, Murfreesboro, TN 37130
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature.
The name and the Florida street address of the registered agent are:
NRAI Services, Inc.
Name
526 E. Park Avenue
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State, and Zip
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.  NRAI Services, Inc.  By:  Lunck A Cayler
Registered Agent's Signature Charles A. Coyle - Assistant Secretary
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.)
Ann S. Benson, Assistant Secretary
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)