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## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : VOIGT & VOIGT, P.A.

Account Number : I20030000017 Phone : (941)925-2324 Fax Number : (941)925-2924

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IVISIÓN OF CORPORAJION

# LIMITED LIABILITY COMPANY

MEDICAL LEASING GROUP, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

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TALL AHASSEE, FLORIDA

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: MEDICAL LEASING GROUP, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 747 AUTUMN CREST DRIVE, SARASOTA, FL 34232

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

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

VOIGT & VOIGT, P.A	V
<u> </u>	Name
2042 BEE RIDGE RO	AD
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
SARASOTA,	<sub>FL</sub> 34239
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.

Registered Agent's Signature

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

Signature of a member or ap 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.)

KEEFE C. FUGLEBERG

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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