Apr-29-2083 04:37pm From-DAVID WILLIAMS LAW FIRM PA 302-575-0925

T-684 P.001/002 F-254

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000160658 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0383

From:

: AGENTS AND CORPORATIONS, INC Account Name

Account Number : I20010000112 : (302)575-0875 Phone : (302)575-0925 Fax Number

LIMITED LIABILITY COMPANY

PowerPatient, LLC

Certificate of Status	0
Certified Copy	O O
Page Count	01
Estimated Charge	\$125.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: PowerPatient, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2048 SE 15th Ct., Pompano Beach, FL 33062

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

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

Agents and Corporations, Inc.: Suite E, 773 4th Avenue North Naples, FL 34102

Having been named as registered agent and to accept services 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.

Waria N. Williams
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 premise or an authorized representative of a member.

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

Walter J. Levy

Typed or printed name of signes