

L04000003171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

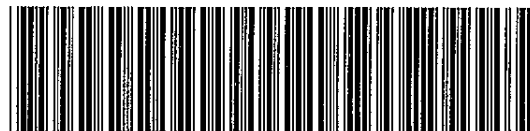
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100025824671

01/12/04--01005--013 \*\*130.00

04 JAN - 9 AM 11:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

L04-3171  
OK

FF \$125  
CUS 5

**MILTON H. BAXLEY II**

ATTORNEY AT LAW  
c/o 1929 N.W. 12th TERRACE  
GAINESVILLE, FLORIDA [32609]

FEDERAL TAXATION  
PERSONAL INJURY AND WRONGFUL DEATH  
TRIAL PRACTICE

Telephone (352) 375 - 1616

January 5, 2004

MAILING ADDRESS  
c/o 1929 N.W. 12 TH TERRACE  
GAINESVILLE, FLORIDA [32609]

Fax (352) 335 - 8448

Honorable Glenda E. Hood  
Secretary of State  
State of Florida  
The Capitol  
Tallahassee, Florida 32339-0001

Re: Articles of Organization of True Health Systems, L.L.C.

Dear Ms. Hood:

I am enclosing the following:

1. Original and one (1) copy of Articles of Organization of True Health Systems, L.L.C.; and
2. A money order in the amount of \$130.00 to cover filing fees.

Please file the enclosed Articles of Organization at the earliest possible time and send your confirmation to me. If you require anything else to effectively establish the above referenced limited liability company, please advise me immediately.

Very truly yours,

  
for Milton H. Baxley II

Enclosures

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN - 9 11:35

FILED

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I

The name of the Limited Liability Company is:

**True Health Systems, L.L.C.**

## ARTICLE II

The mailing address and street address of the principle office of the limited liability company is:

Mailing and Street address:

c/o 1043 Greene's Way Circle  
Collegeville, Pennsylvania [19426]

## ARTICLE III

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

Milton H. Baxley II  
c/o 1929 N.W. 12<sup>th</sup> Terrace  
Gainesville, Florida [32609]

*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 provision of all state 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..*

  
(Milton H. Baxley II, Registered Agent)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 JAN - 9 AM 11:35

FILED

**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.

  
Richard Bynum- Member

FILED

04 JAN -9 AM 11:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA