

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : TRIAD PROFESSIONAL SERVICES, LLC
Account Number : I20020000094
Phone : (770) 777-2091
Fax Number : (770) 777-2094

LIMITED LIABILITY COMPANY

Stratus Health Holdings, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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FALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

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Handwritten signature/initials

ARTICLES OF ORGANIZATION ((H04000023214 3)))
FOR
STRATUS HEALTH HOLDINGS, LLC

ARTICLE I
NAME

The name of the limited liability company is Stratus Health Holdings, LLC.

ARTICLE II
ADDRESS

The mailing address and street address of the principal office of the limited liability company is 15411 North Florida Avenue, Tampa, Florida 33613.

ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

The name and Florida street address of the limited liability company's registered agent are:

NRAI Services, Inc.
526 East Park Avenue
Tallahassee, Florida 32301

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these articles, 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

ARTICLE IV
MANAGEMENT

The limited liability company is a MEMBER managed company.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 as of this 2nd day of February, 2004.

By:



Authorized Representative

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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