# 104000015804

| (Requestor's Name)                      |                   |             |
|---|-------------------|-------------|
| (Add                                    | dress)            |             |
|   | ·                 |             |
| (Add                                    | dress)            |             |
| (City                                   | y/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT            | MAIL        |
|   |                   |             |
| (Bu:                                    | siness Entity Nar | ne)         |
| ¥                                       |                   |             |
| (Do                                     | cument Number)    |             |
| Certified Copies                        | Certificates      | s of Status |
| Special Instructions to Filing Officer: |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |

Office Use Only



200027985262

02/26/04--01021--022 \*\*46.25

02/02/04--01075--002 \*\*78.75

TALLAL COSES, FLORIDA

i Dit 15th



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 10, 2004

JULIA LAW 250 S. MAIN AVENUE GROVELAND, FL 34736

SUBJECT: STERILE SOLUTIONS, L.L.C.

Ref. Number: W04000005518

We have received your document for STERILE SOLUTIONS, L.L.C. and check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$46.25. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 104A00008957

### ROBERTS & LAW, P.A.

ATTORNEYS AT LAW POST OFFICE BOX 57 250 S. MAIN AVENUE GROVELAND, FLORIDA 34736

TELEPHONE NUMBER: (352) 429-2183 FAX NUMBER: (352) 429-3035

ARTHUR E. ROBERTS (1929-1997) JULIA R. LAW

January 30, 2004

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Sterile Solutions, LLC

Gentlemen:

Relative to the subject new limited liability company, enclosed please find the original and one copy of the articles of organization, which I would appreciate your filing and returning the copy to me certified.

Also enclosed is my trust account check in the amount of \$78.75, representing the \$35.00 filing fee, \$8.75, for certified copy, and \$35.00 for registered agent fee.

TO THE RESERVE OF THE PROPERTY OF

Thanking you for your assistance in this matter, I remain

Sincerely,

JULIA R. LAW

JRL/bs

**Enclosures** 

North Additional Equation (1)

#### **QE**

#### STERILE SOLUTIONS, L.L.C.

The undersigned certify that we have associated ourselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall serve as the charter and authority for the conduct of business of the limited liability company.

## ARTICLE I NAME. PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The name of the limited liability company shall be STERILE SOLUTIONS, L.L.C. and its principal office shall be located at 1450 Portmoor Way, Winter Garden, Florida 34787, but it shall have the power and authority to establish branch offices at any other place or places as the members may designate. The mailing address of the limited liability company shall be 1450 Portmoor Way, Winter Garden, Florida 34787.

## ARTICLE II PURPOSES AND POWERS

In addition to the powers authorized by the laws of the State of Florida for limited liability companies, the general nature of the business or businesses to be transacted, and which the limited liability company is authorized to transact, shall be as follows:

To engage in any activity or business authorized under the Florida
 Statutes.

i

In general, to carry on any and all incidental business; to have and

2.

- 3. To purchase or otherwise acquire, undertake, carry on, improve or develop, all or any of the business, good will, rights, assets, and liabilities of any person, firm, association, or corporation carrying on any kind of business of a similar nature to that which this limited liability company is authorized to carry on, pursuant to the provisions of these Articles; and to hold, utilize and in any manner dispose of the rights and property so acquired.
- 4. To enter into and make all necessary contracts for its business with any person, entity, partnership, association, corporation, domestic or foreign, or of any domestic or foreign state, government or governmental authority, or of any political or administrative subdivision or department, and to perform and carry out, assign, cancel, or rescind any of such contracts.
- 5. To exercise all or any of the limited liability company powers, and to carry out all or any of the purposes, enumerated in these Articles and otherwise granted permitted by law, while acting as agent, nominee, or attorney in fact for any persons or corporations, and perform any service under contract or otherwise for any corporation, joint stock company, association, partnership, firm, syndicate, individual, or other entity, and in this capacity or under this arrangement develop, improve, stabilize, strengthen, or extend the property and commercial interest of the property and to aid, assist, or participate in any lawful enterprise in connection with or incidental to the agency, representation or service and to render any other service or assistance it may lawfully

1

do under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit.

accomplishment of any of the purposes, or the attainment of any of the objects, or the furtherance of any of the powers set forth in these Articles, either alone or in association with others incidental or pertaining to, or going out of, or connected with its business or powers, provided the same shall not be inconsistent with the laws of the State of Florida. The several clauses contained in this statement of the general nature of the business or businesses to be transacted shall be construed as both purposes and powers of this limited liability company, and statements contained in each clause shall, except as otherwise expressed, be in no way limited or restricted by reference to or inference from the terms of any other clause. They shall be regarded as independent purposes and powers. Nothing contained in these Articles shall be deemed or construed as authorizing or permitting, or purporting to authorize or permit the limited liability company to carry on any business, exercise any power, or to do any act which a limited liability company ma not, under Florida laws, lawfully carry on, exercise, or do.

## ARTICLE III EXERCISE OF POWERS

All limited liability company powers shall be exercised by or under the authority of, and the business and affairs of this limited liability company shall be managed under the direction of the members of this limited liability company. This Article may be amended from time to time in the regulations of the limited liability company by a unanimous vote of the members of the limited liability company.

# TED

## ARTICLE IV MANAGEMENT

This limited liability company shall be managed by the members. The name and address of the initial member of the limited liability company are as follows:

JACK W. MATHIS 1450 Portmoor Way Winter Garden, Florida 34787

## ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The address of the initial registered office of the limited liability company is1450 Portmoor Way, Winter Garden, Florida 34787. The initial registered agent at that address is JACK W. MATHIS.

#### ARTICLE VI DURATION

This limited liability company shall exist in perpetuity, or until dissolved in a

manner provided by law, or as provided in the regulations adopted by the members.

The undersigned, being the original members of the limited liability company certify that this instrument constitutes the proposed Articles of Organization of STERILE

SOLUTIONS, L.L.C., executed by the undersigned in Lake County, Florida, on

1-30 , 2004.

JACK/W. MATHIS

#### STATE OF FLORIDA COUNTY OF LAKE

I HEREBY CERTIFY THAT ON THIS DAY BEFORE ME, a Notary Public, duly authorized in the State and County named above to take acknowledgments, personally appeared JACK W. MATHIS, who is personally known to me, or who produced PLOLEM320-439-69-461-0, as identification, who are the members of the limited liability company herein, and acknowledged that he subscribed to these Articles of Organization.

WITNESS my hand and seal in the County and State named above this

day of January, 2004.

Notary Public

Beverly S. Staples
MY COMMISSION # DD170446 EXPIRES
January 15, 2007
SONDED THRU TROY FAIN INSURANCE, INC.

MY COMMISSION # DD170446 EXPIRE!

MY COMMISSION # DD170446 EXPIRE!

BOVED THRU TROYAGUING EXPIRE!

04 FEB 03 MM 8: 2n

TILED

## STATEMENT DESIGNATING REGISTERED AGENT AND OFFICE

Pursuant to the provisions of Sections 608.415 and 608.407(1)(c) of the Florida Limited Liability Company Act, the limited liability company identified below submits the following statement in designating its registered office and registered agent in the State of Florida:

The name of the limited liability company is STERILE SOLUTIONS, L.L.C.

The name of the registered agent for STERILE SOLUTIONS, L.L.C., is JACK W. MATHIS, and the street address of the company's principal office where the agent is located is 1450 Portmoor Way, Winter Garden, Florida 34787.

This statement is to acknowledge that, as indicated above, STERILE SOLUTIONS, L.L.C. has appointed me, JACK W. MATHIS, as its registered agent to accept service of process for the company at the place designated above in this certificate. I accept this 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.

Dated this 30 day of January, 2004.

JACK W. MATHIS

The foregoing instrument was acknowledged before me this day of 2004, by JACK W. MATHIS, agent on behalf of STERILE JTIONS, P.L.C., a limited liability company. He is personally known to me or has

produced fine M320 439-66-461-0, as identification.

Notary Public

