82069 Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name : GUNSTER, YOAKLEY, ETAL. (WEST PALM BEACH)

Account Number : 076117000420

: (561)650-0728

Fax Number

: (561)655-5677

LIMITED LIABILITY COMPANY

CFR Homecare Partners, LLC

Certificate of Status Certified Copy 1 Page Count 02 Estimated Charge \$160.00

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Corporate Filing

Rublic Access Help

7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mission Bay Office Plaza Miss	iling Address: sion Bay Office Plaza
ARTICLE II - Address: The mailing address and street address of the princip Principal Office Address: Mission Bay Office Plaza 20283 State Road 7 Boca Raton, Florida 33498 ARTICLE III - Registered Agent, Registered Office Address of the registered address addre	iling Address: sion Bay Office Plaza
The mailing address and street address of the princip Principal Office Address: Mission Bay Office Plaza 20283 State Road 7 Boca Raton, Florida 33498 ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the registered	iling Address: sion Bay Office Plaza
Principal Office Address: Mission Bay Office Plaza 20283 State Road 7 Boca Raton, Florida 33498 ARTICLE III - Registered Agent, Registered Office Agent, Registered Office Agent, Registered Agent, Registered Office Agent, Registered Office Agent, Registered Office Agent, Registered Office Address of the registered Agent, Registered Office Address:	iling Address: sion Bay Office Plaza
Mission Bay Office Plaza 20283 State Road 7 Boca Raton, Florida 33498 ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered agent.	sion Bay Office Piaza
20283 State Road 7 Boca Raton, Florida 33498 ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the register	20 Ot-1- 17
20283 State Road 7 Boca Raton, Florida 33498 ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the register	33 State Road 7
Boca Raton, Florida 33498 Boca Raton, Registered Office and Florida 34498 Boca Raton, Florida 33498 Boca Raton, Registered Office and Florida 34498 Boca Rato	- D-t D 22400
ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the registered Forman	B MARON, FIORIDE 33498
Diskard Farmer	ce, & Registered Agent's Signatures
Priorital Portifair	
Name	A A A
10120 Armani Drive	5 2 3 3 3 3 3 3 3 3 3 3
Florida street address (F	O. Box NOT acceptable)
Boynton Beach, Florida 33437 FL	· · · · · · · · · · · · · · · · · · ·
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

(CONTINUED)

Page 1 of 2

MGRM	CFR Medical Holdings, LLC Mission Bay Office Plaza, 20283 State Road 7 Boca Raton, Florida 33498
	Mission Bay Office Plaza, 20283 State Road 7 Boca Raton, Florida 33498
(Use attachment if necessary)	
NOTE: An additional article must be a	dded if an effective date is requested.
REQUIRED SIGNATURE:	
Ruha	of Fan
Signature of a member or a	n authorised representative of a member.
	i08.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)
Richard Forman	printed name of signee

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)