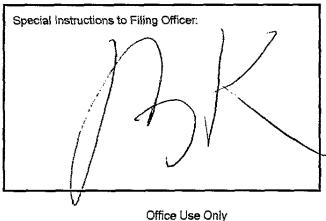
L06000032344

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status





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ACCOUNT NO. : 0/2100000032	ACCOUNT	NO.	:	072100000032
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REFERENCE : 94<u>7</u>635

AUTHORIZATION : Smelle Rena

COST LIMIT : \$ 155.00

ORDER DATE: March 28, 2006

ORDER TIME : 3:42 PM

ORDER NO. : 947635-005

CUSTOMER NO: 81514A

DOMESTIC FILING

NAME:

LEGAL NURSE CONSULTANTS OF

CENTRAL FLORIDA, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX __ CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS:

+8636869157

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The Name of the Limited Liability Company is: Legal Nurse Consultants of Central Florida, LLC

ARTICLE I) - Address:

The mailing address and street address of the principal office of the Limited Liability Company are:

a: Mailing Address: 6475 Bristol Oaks Drive, Lakeland, Florida 33811 b: Street Address: 6475 Bristol Oaks Drive, Lakeland, Florida 33811

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature
The name and the Florida street address of the registered agent are:
The name and the Florida street address of the registered agent are: Caroline Nelson Name
Caroline Nelson
Name
6475 Bristol Oaks Drive
Fiorida street address (Post Office Box NOT acceptable)
Lakeland, FL 33811
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 actin 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.
· _ · _ ·
Caroline Alelba
Registered Agent's Signature
ARTICLE IV – Management (Check applicable box)
The Limited Liability Company is to be managed by one manager or
managers and is, therefore, a manager – managed company.
X The Limited Liability Company is to be managed by one member or
members and is, therefore, member - managed company.
and all an
Complete (CCS)
Signature of a member or an authorized representative of a member.
(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.)
Caroline Neison
Typed or printed name of signee