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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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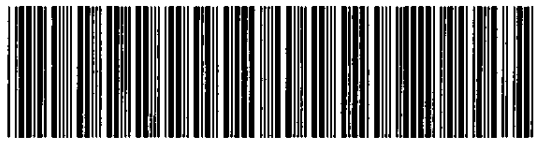
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 24 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEDictate
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Martha Morrison
(Name of Person)

MEDictate LLC
(Firm/Company)

4650 Saxon Drive
(Address)

New Smyrna Beach, Florida 32149
(City/State and Zip Code)

For further information concerning this matter, please call:

Martha Morrison at (386) 427-6670
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION

OF

MEDICTATE LLC

ARTICLE I

The name of the company shall be:

MEDICTATE LLC

ARTICLE II

The principal place of business of the company shall be:

4650 Saxon Dr
New Smyrna Beach FL 32169

The mailing address of the company shall be:

4650 Saxon Dr
New Smyrna Beach FL 32169

ARTICLE III

The name and address of the initial registered agent is:

Martha L Morrison
4650 Saxon Dr
New Smyrna Beach FL 32169

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, Florida Statutes.



Signature/Registered Agent

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TALLAHASSEE, FLORIDA

ARTICLE IV

The Limited Liability Company is to be managed by one or more managers, and is therefore a manager-managed company.

ARTICLE V

Signature of one 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.

Martha L. Morrison

Martha L Morrison
4650 Saxon Dr
New Smyrna Beach FL 32169

The above has executed these Articles of Organization this

4th day of January 2006.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA