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FLORIDA/FOREIGN LIMITED LIABILITY CO.**Healthstar Medical Service, PLLC**

Certificate of Status	1
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DIVISION OF CORPORATIONS

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Healthstar Medical Service, PLLC**

ARTICLE II - Address

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

**10331 Autumn Breez Drive, Unit 202
Bonita Springs, FL 34135**

ARTICLE III - Registered Agent, Registered Office & Registered Agents Signature

The name and Florida street address of the registered agent are:

Charles Abels Massie

Name

12065 Metro Parkway, Suite 101

(P.O. Box or Mail Drop Box NOT acceptable)

Fort Myers, FL 33912

*ARTICLE IV - The professional (City/State/Zip)
medicine service. Limited Liability Company shall render internal
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.*

Charles Abels Massie

Registered Agent's Signature - **Charles Abels Massie**

ARTICLE IV - Management (Check box if applicable)

☐

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

Bonnie Rashid
Signature of a member or 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.)

Bonnie M. Rashid

Typed or printed name of signee

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