LU7000013456

(Requestor's Name) (Address) (Address)	500087116115	
(City/State/Zip/Phone #)	. 02/06/0701014015 **125.0	
(Business Entity Name) (Document Number)		
Certified Copies Certificates of Status	OT FEB -6 AN ID: 53 ONE OF THE PROPERTY OF TH	
Office Use Only EFF	O7 FEB - 6 AM SECRETARY OF TALLAHASSEE, F	



UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528 P

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

EFFECTIVE DATE

February 6, 2007

CORPORATION NAME (S) AND DOCUMENT NUMBER OF SHORE OF SHOR

MehraVista Health, LLC

Please stamp effective date on page 1 of articles

	Filing Evidence ⊠ Plain/Confirmation Copy	Type of Document y □ Certificate of Status
	□ Certified Copy	☐ Certificate of Good Standing
		□ Articles Only
	Retrieval Request Photocopy Certified Copy	 □ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate □ Other
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	Non Profit	Resignation of RA Officer/Director
X	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
	Other	Merger
	OTHER FILINGS	REGISTRATION/QUALIFICATION
	Annual Reports	Foreign
	Fictitious Name	Limited Liability
	Name Reservation	Reinstatement
	Reinstatement	Trademark
		Other

EFFECTIVE DATE 2 5 07

ARTICLES OF ORGANIZATION OF MehraVista Health, LLC



The undersigned hereby certifies that he is the Authorized Representative of a Member who is forming a Limited Liability Company under Florida Statutes Chapters 608. The following Articles of Organization are hereby adopted.

ARTICLE 1. NAME

The name of the Limited Liability Company shall be MehraVista Health, LLC.

ARTICLE 2.
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as of February 5, 2007.

ARTICLE 3.
ADDRESS; PRINCIPAL OFFICE

The mailing address of the Limited Liability Company and the street address of the principal office of the Limited Liability Company is 32196 US Highway 19 North, Palm Harbor, Florida 34684.

ARTICLE 4.
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 150 Second Avenue North, Suite 1100, St. Petersburg, Florida 33701 and the name of its initial registered agent at such address is Philip M. Shasteen.

ARTICLE 5.

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

The undersigned, being the Authorized Representative of a Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of MehraVista Health, LLC.

Executed by the undersigned on February 5, 2007.

Philip M. Shasteen AUTHORIZED REPRESENTATIVE

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 608.415, Florida Statutes, I agree to act in the capacity of Registered Agent for MehraVista Health, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 608.415, Florida Statutes.

DATED this February 5, 2007.

Philip M. Shasteen