# Electronic Articles of Organization For Florida Limited Liability Company

L07000102716 FILED 8:00 AM October 09, 2007 Sec. Of State dcurry

### **Article I**

The name of the Limited Liability Company is: WHEEL MEDIC LLC

#### **Article II**

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

50 5TH STREET SHALIMAR, FL. US 32579

The mailing address of the Limited Liability Company is:

50 5TH STREET SHALIMAR, FL. US 32579

#### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### **Article IV**

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

FORM-A-CORP 4400 PGA BLVD SUITE 900 PALM BEACH GARDENS, FL. 33410

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.

Registered Agent Signature: ADRIAN BRION (MANAGER)

## **Article V**

The name and address of managing members/managers are:

Title: MGRM JENNI BUCCI 50 5TH STREET SHALIMAR, FL. 32579 US

Title: MGRM KALEN COWEN 50 5TH STREET SHALIMAR, FL. 32579 US

Signature of member or an authorized representative of a member

Signature: KALEN COWEN

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