# Florida Department of State Division of Corporations

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# FLORIDA/FOREIGN LIMITED LIABILITY CO.

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From: PYLE

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King Medical Legal Consulting, LLC

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From: PYLE & DELLINGER

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## ARTICLES OF ORGANIZATION

### OF

### KING MEDICAL LEGAL CONSULTING, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, hereby executes the following Articles of Organization.

#### ARTICLE I NAME

The name of the Limited Liability Company is **KING MEDICAL LEGAL CONSULTING**, LLC.

#### ARTICLE II ADDRESS

The street address and the mailing address of the principal office of the Coriga 1676 Areca Palm Dr., Port Orange, FL 32128.

#### ARTICLE III REGISTERED OFFICE AND AGENT

The name of the Registered Agent is **Debra E. King, RN, CEN** and Florida street addressof the registered agent is **1676 Areca Palm Dr., Port Orange, FL 32128**.

**IN WITNESS WHEREOF,** the undersigned Authorized Representative has executed these Articles of Organization on this \_\_\_\_\_\_ day of November, 2008.

King, RN.

#### STATE OF FLORIDA COUNTY OF VOLUSIA

The foregoing Instrument was acknowledged before me this  $4^+$  day of November, 2008, by **Debra E. King, RN, CEN** who  $\Box$  is personally known to me, or  $\Box$  who presented a Florida drivers license or  $\blacksquare$  a <u>Georgia</u> drivers license or  $\Box$ , as identification.



Notary Public <u>Michael A. Pyle</u> (Printed Name) My Commission Expires:

(In accordance with Section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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### ACCEPTANCE OF DESIGNATION

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, Florida Statutes.

CEN tered Agent

FILED 2000 NOV -5 AH 8: 37 SECRETARY OF STATE

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