## Electronic Articles of Organization For Florida Limited Liability Company

L09000071434 FILED 8:00 AM July 24, 2009 Sec. Of State clewis

#### Article I

The name of the Limited Liability Company is: PATIENT PACKETS LLC

#### **Article II**

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

2054 ALTA MEADOWS LANE SUITE 2409 DELRAY BEACH, FL. US 33444

The mailing address of the Limited Liability Company is:

2054 ALTA MEADOWS LANE SUITE 2409 DELRAY BEACH, FL. US 33444

#### **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:

PATRICK DUROCHER 2054 ALTA MEADOWS LANE SUITE 2409 DELRAY BEACH, FL. 33444

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: PATRICK DUROCHER

# Article V

The name and address of managing members/managers are:

Title: MGR PATRICK DUROCHER 2054 ALTA MEADOWS LANE, SUITE 2409 DELRAY BEACH, FL. 33444 US

Signature of member or an authorized representative of a member

Signature: PATRICK DUROCHER

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