

Division of Corporations

Page 1 of 2

**L10000199683**

Florida Department of State  
Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.**  
**Advanced Medical Consultants and Paralegal Services**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

**D. BRUCE**

SEP 09 2010

**EXAMINER**

H10000199683

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is: **Advanced Medical Consultants and Paralegal Services LLC**

**ARTICLE II - Address**

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

**Principal Office Address:**

**Mailing Address:**

1965 Capital Circle NE

1965 Capital Circle NE

Tallahassee, FL 32308

Tallahassee, FL 32308

**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature**

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

Uchenna Emenike

Name

3301 Charleston Road

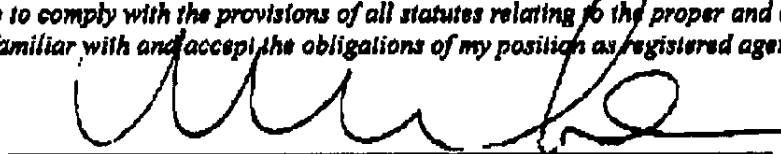
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*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. 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.*



**Registered Agent's Signature - Uchenna Emenike**

**ARTICLE IV - Manager(s) or Managing Member(s):**

H10000199683

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Uchenna Emenike - 3301 Charleston Road, Tallahassee, FL 32309

MGRM

Mignon Emenike - 3301 Charleston Road, Tallahassee, FL 32309

(Use attachment if necessary)

**REQUIRED SIGNATURE:**



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. )

**Uchenna Emenike**

**Typed or printed name of signee**

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