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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CSH SERVICES, LLC

Account Number : 120070000160 Phone : (800)494-3124

Fax Number : (561) 455-9885

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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### FLORIDA LIMITED LIABILITY CO.

## **EAST COAST HOSPITAL FURNITURE AND SALES LLC**

12 FEB 20 PH 2: 48 SECRETAN NON STATE ABLAHASSEE, FLORING

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

### ARTICLE I NAME

The name of the Limited Liability Company is:

EAST COAST HOSPITAL FURNITURE AND SALES LLC

### ARTICLE II ADDRESS

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

4300 S US HIGHWAY 1, STE 203/134 JUPITER, FLORIDA 33477

# 2012 FEB 20 AM 8: 44 SEERLIARY OF STATE TALEAHASSEE, FLORID

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

DONALD GINGERELLA 4300 S US HIGHWAY 1, STE 203/134 JUPITER, FLORIDA 33477

Having been named as registered agent 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.

DONALD GINGERELLA / Registered Agent's signature

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PAGE 2 EAST COAST HOSPITAL FURNITURE AND SALES LLC

### ARTICLE IV MANAGEMENT

The Limited Liability Company Is to be managed by one or more members and is, therefore, a Member Managed Company.

### ARTICLE V MEMBERS (optional)

MANAGING MEMBER
DONALD GINGERELLA
4300 S US HIGHWAY 1, STE 203/134
JUPITER, FLORIDA 33477

2012 FEB 20 AM 8: 14
SUGRETARY OF STATE.
TALL AHASSEE, FLORIDA

Donall Complet 2-20-2012

Signature of a member or an 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.

DONALD GINGERELLA