# Electronic Articles of Organization For Florida Limited Liability Company

L13000105940 FILED 8:00 AM July 26, 2013 Sec. Of State jbryan

## **Article I**

The name of the Limited Liability Company is: SUNCOAST CLINICAL MONITORING, LLC

#### **Article II**

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

2204 LAKEWOOD DRIVE NOKOMIS, FL. US 34275

The mailing address of the Limited Liability Company is:

2204 LAKEWOOD DRIVE NOKOMIS, FL. US 34275

#### **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:

CAROLYN A COLEMAN 2204 LAKEWOOD DRIVE NOKOMIS, FL. 34275

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: CAROLYN COLEMAN

### Article V

The name and address of managing members/managers are:

Title: MGRM CAROLYN A COLEMAN 2204 LAKEWOOD DRIVE NOKOMIS, FL. 34275 US

Title: MGRM WILLIAM L COLEMAN 2204 LAKEWOOD DRIVE

NOKOMIS, FL. 34275 US Signature of member or an authorized representative of a member

Electronic Signature: CAROLYN COLEMAN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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