

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L13000106577  
FILED 8:00 AM  
July 29, 2013  
Sec. Of State  
kasaly**

**Article I**

The name of the Limited Liability Company is:  
ACCORDO HEALTH GROUP LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
195 WEKIVA SPRINGS RD  
300  
LONGWOOD, FL. 32779

The mailing address of the Limited Liability Company is:  
195 WEKIVA SPRINGS RD  
300  
LONGWOOD, FL. 32779

**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:  
LYNN H ARNOLD  
195 WEKIVA SPRINGS BLVD  
300  
LONGWOOD, FL. 32779

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: LYNN H ARNOLD

## **Article V**

The name and address of managing members/managers are:

Title: MGRM  
LYNN H ARNOLD  
195 WEKIVA SPRINGS BLVD, SUITE 300  
LONGWOOD, FL. 32779

Title: MGRM  
JOSEPH A CANNIZZARO  
644 EAST CLUB CIRCLE  
LONGWOOD, FL. 32779

Title: MGRM  
HANNAH K JONES  
9468 TELFER RUN  
ORLANDO, FL. 32817

Title: MGRM  
ALEJANDRO SANCHEZ  
3318 BUFFAM PL  
CASSELBERRY, FL. 32707

Title: MGRM  
SHARON R THETFORD  
970 LONGWOOD CLUB PL  
LONGWOOD, FL. 32750

Title: MGRM  
SANDRA G WAINMAN  
638 BLAIRSHIRE CIRCLE  
WINTER PARK, FL. 32792

## **Article VI**

The effective date for this Limited Liability Company shall be:

07/29/2013

Signature of member or an authorized representative of a member

Electronic Signature: LYNN ARNOLD

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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