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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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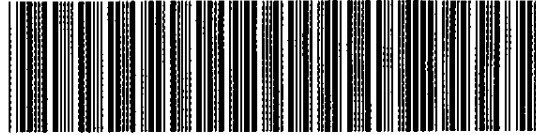
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ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560

December 23, 2013

Florida Secretary of State
Division of Corporations
2661 Executive Center Circle West
Tallahassee, Florida 32301

VIA HAND DELIVERY

RE: CH Wingo, P.L.

Dear Sir or Madam:

Enclosed for filing are Articles of Organization for the above-referenced company and our check for \$155.00. Also enclosed is an extra copy of the Articles for the certified copy. Please call Chris Vause at 425-5446 when the certified copy is ready to be picked-up.

Thank you for your assistance.

Sincerely,



Chris Vause
Secretary to Robert A. Pierce

/cv

Enclosures

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**ARTICLES OF ORGANIZATION
OF
CH WINGO, P.L.**

The undersigned, pursuant to the provisions of Chapter 621, Florida Statutes, provides the following information for the purpose of forming a Professional Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.
Name**

The name of the Professional Limited Liability Company is **CH Wingo, P.L.**

**ARTICLE 2.
Address**

The street address of the place of business in Florida is:

Unit 216A
429 Bridge Lane
Water Sound, Florida 32461

The mailing address of the business in Florida is:

P. O. Box 12879
Tallahassee, Florida 32317-2879

**ARTICLE 3.
Purpose**

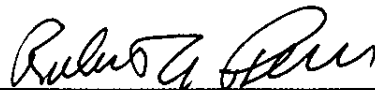
The purpose for which this Professional Limited Liability Company is formed is to engage in the practice of medicine.

**ARTICLE 4.
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

Robert A. Pierce
123 South Calhoun Street
Tallahassee, Florida 32301-1517

Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.



Robert A. Pierce, Registered Agent

ARTICLE 5. Management

The Professional Limited Liability Company shall be managed by its Members and is, therefore, a Member-managed company. The name and address of each Managing Member are as follows:

Charles H. Wingo, M.D., MGRM

Unit 216A
429 Bridge Lane
Water Sound, Florida 32461

IN WITNESS WHEREOF, the undersigned have executed these Articles of Organization this 23rd day of December, 2013.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.



ROBERT A. PIERCE, as
Representative of the Members