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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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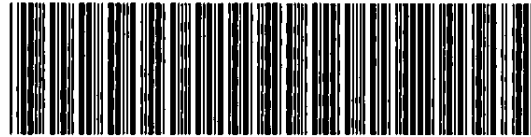
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

EFFECTIVE DATE 12/19/13

JAN 02 2014

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Florida Family Care Centers of Orlando, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark S. Feluren

Name of Person

Genovese Joblove & Battista, P.A.

Firm/Company

200 E. Broward Blvd., Suite 1110

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

mfeluren@gjb-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark S. Feluren

Name of Person

at ( 954 ) 453-8000

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &  
Certificate of Status



\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)



\$160.00 Filing Fee &  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street/Courier Address

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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2019 DEC 26 PM 12:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**

**OF**

**FLORIDA FAMILY PRIMARY CARE CENTERS OF ORLANDO, LLC**  
**a Florida Limited Liability Company**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I - Name:**

The name of the limited liability company (hereinafter referred to as the "Company") is Florida Family Primary Care Centers of Orlando, LLC.

**ARTICLE II - Address:**

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

4830 W. Kennedy Blvd, Suite 600, Tampa, FL 33609

**ARTICLE III - Registered Agent:**

The address of the initial registered agent of the Corporation in the State of Florida is 200 E Broward Boulevard, Suite 1110, Fort Lauderdale, FL 33301 and the name of the initial registered agent of the Corporation at such address is Mark S. Feluren, Esquire.

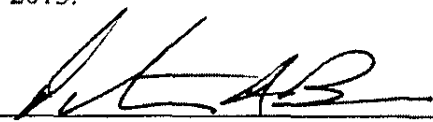
**ARTICLE IV - Management:**

The Company is to be manager managed.

**ARTICLE V - Existence of Company:**

The existence of the Company shall commence on this 19<sup>th</sup> day of December 2013.

**IN WITNESS WHEREOF**, the undersigned member has signed these Articles of Organization this 19th day of December 2013.

  
\_\_\_\_\_  
Octavio A. Bravo, Member

EFFECTIVE DATE 12/19/13

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CLERK TARY B. FOSTER  
ALLAHASSEE COUNTY  
FLORIDA

Acceptance of Appointment by Registered Agent

Pursuant to the provisions of the Florida Limited Liability Company Act, the undersigned does hereby accept appointment as registered agent on which process may be served within the State of Florida for the proposed Florida Limited Liability Company named in the foregoing Articles of Organization.



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Mark S. Feluren, Esquire

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