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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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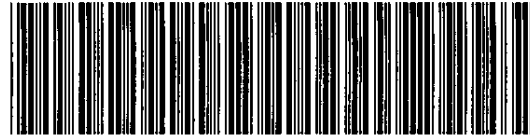
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 30 2014

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Infinia Legal Nurse Consulting, 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:

Rene
Name of Person

The Draves Law Firm, P.A.
Firm/Company

120 E. Concord St
Address

Orlando, FL 32801
City/State and Zip Code

rene@draveslawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rene at (407) 423-1183
Name of Person 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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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
FOR
INFINIA LEGAL NURSE CONSULTING, LLC

ARTICLE I – Name

The name of the limited liability company is:

Infinia Legal Nurse Consulting, LLC

ARTICLE II – Address

The mailing and street address of the principal office of the limited liability company is:

Principal Office Address:

8403 Titkos Drive, Apt. 104
Kissimmee, FL 34747

Mailing Address:


8297 Champions Gate Blvd, #406
Champions Gate, FL 33896

ARTICLE III – Registered Agent, Registered Office

The name and street address of the initial Registered Agent are:

Donna L. Draves, Esq.
120 East Concord Street
Orlando, FL 32801

Having been named as Registered Agent to accept service of process for the above stated limited liability company at the place designated in these Articles, I am familiar with and 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 am familiar with and accept the obligations of my position as Registered Agent as provided for in Chapter 605, F.S.


Donna L. Draves, Esq.

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TALLAHASSEE, FLORIDA

ARTICLE IV – Management

The name and address of the initial member of the limited liability company is:

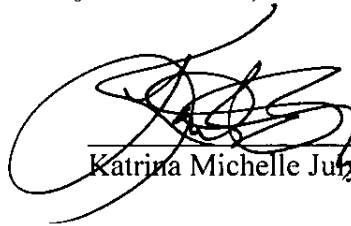
AMBR

Katrina Michelle July-Moore
8403 Titkos Drive, Apt. 104
Kissimmee, FL 34747

ARTICLE V – Effective Date

The effective date of the limited liability company is the filing date of these Articles.

(In accordance with §605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §817.155, F.S.)



Katrina Michelle July-Moore, Member

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