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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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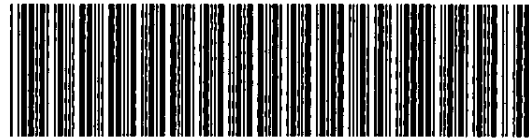
(Business Entity Name)

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01/15/15--01021--023 **78.75

01/15/15--01021--024 **46.25

FILED
15 JAN 15 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 30 2015

T. HAMPTON

DONALD W. YETTER, P.A.

ATTORNEY AND COUNSELLOR AT LAW

1111 NINTH AVENUE WEST

SUITE B

BRADENTON, FLORIDA 34205

TELEPHONE (941) 749-1402
FAX (941) 748-0657

MAILING ADDRESS:
POST OFFICE BOX 9335
BRADENTON, FLORIDA 34206

January 8, 2015

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Clinical Consulting Alliance, LLC

Dear Sir or Madam:

Enclosed please find an original and one (1) copy of the Articles of Organization for Clinical Consulting Alliance, LLC and my client's check number 3152 in the amount of \$78.75 and my check number 13711 in the amount of \$46.25 to cover the filing cost thereof.

Please file the original and return a copy to me along with the Certificate of Organization.

Respectfully,

A handwritten signature in black ink, appearing to read "Donald W. Yetter", with a stylized flourish at the end.

DONALD W. YETTER
DWY/jlm

Enclosures

THIS INSTRUMENT PREPARED BY:

DONALD W. YETTER, Esquire
1111 - Ninth Avenue West, Suite B
Bradenton, Florida 34205
941-749-1402 (tel)
941-748-0657 (fax)

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF
CLINICAL CONSULTING ALLIANCE, LLC

ARTICLE I - NAME

THE NAME OF THIS Limited Liability Company shall be **CLINICAL CONSULTING ALLIANCE, LLC**.

ARTICLE II - ADDRESS

THE MAILING ADDRESS is 7216 13th Ave Dr W, Bradenton, FL 34209 and street address of the principal office of the Limited Liability Company shall be 7216 13th Ave Dr W, Bradenton, Florida 34209.

ARTICLE III - DURATION

THE PERIOD OF DURATION for this Limited Liability Company shall be until (i) the death, retirement, resignation and/or dissolution of a member of the Limited Liability Company; (ii) the occurrence of any other event that terminates the continued membership of a member in the Limited Liability Company; (iii) the Limited Liability Company is dissolved in a manner provided by law; or (iv) as further provided in the regulations of the Limited Liability Company as adopted by the members. The members of the Limited Liability Company shall have a right to continue the business of the Limited Liability Company on the unanimous consent of the remaining members.

ARTICLE IV - MANAGEMENT

THIS LIMITED LIABILITY COMPANY is to be managed by "Managers" and the name and address of the person or entity who is to serve as such Manager is:

FLORENCE T. WILKINS
7216 13th Ave Dr W
Bradenton, FL 34209

ARTICLE V - MEMBERSHIP RESTRICTIONS

MEMBERS OF THE LIMITED Liability Company shall have a right to admit new members by unanimous consent. Contributions required of new members shall be determined as of the time of such members admission to this Limited Liability Company.

A MEMBER'S INTEREST in this Limited Liability Company may not be sold or otherwise transferred except with the unanimous written consent of all of the members of the Limited Liability Company.

ON THE DEATH, RETIREMENT, resignation or dissolution of a member of this Limited Liability Company, or the occurrence of any other event that terminates the continued membership of a member in the Limited Liability Company, the remaining members of the Limited Liability Company shall have the right to continue the business on unanimous consent of the remaining members.

ARTICLE VI

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

THE STREET ADDRESS of the initial Registered Office of this Limited Liability Company is 7216 13th Ave Dr W, Bradenton, Florida 34209. The name of the Limited Liability Company's initial Registered Agent at that address is **RICHARD E. WILKINS**.

THE UNDERSIGNED BEING an original member of this Limited Liability Company certifies that this instrument constitutes the proposed Articles Of Organization of **CLINICAL CONSULTING ALLIANCE, LLC**.

EXECUTED BY THE undersigned in Bradenton, Manatee County, Florida, on January 8, 2015.

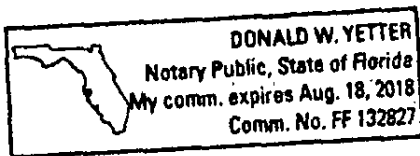


FLORENCE T. WILKINS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATE OF FLORIDA
COUNTY OF MANATEE**

THE FOREGOING instrument was acknowledged before me on this 8th day of January, 2015, by **FLORENCE T. WILKINS**, who is [X] personally known to me or who [] produced a valid Florida drivers license as identification.



Donald W. Yetter

Notary Public
Print Name:
My Commission Expires:
My Commission Number:

ACCEPTANCE OF REGISTERED AGENT

PURSUANT to Section 605.0113, Florida Statutes, the following is submitted in compliance with said statute: That **CLINICAL CONSULTING ALLIANCE, LLC**, desiring to organize under the laws of the State of Florida with its principal office as indicated in the foregoing Articles Of Organization, in the County of Manatee, State of Florida, has named **RICHARD E. WILKINS**, whose address is 7216 13th Ave Dr W, Bradenton, FL 34209, as its agent to accept service of process within the State of Florida.

ACKNOWLEDGMENT

HAVING been named to accept service of process for **CLINICAL CONSULTING ALLIANCE, LLC**, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said statute, relative to keeping open said office.

DATED: January 8, 2015.

REGISTERED AGENT:

Richard E. Wilkins

RICHARD E. WILKINS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA