115000138690

(Req	uestor's Name)		
bbA)	ress)		
(Add	ress)		
(City	/State/Zip/Phone	÷#)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
:			





300275970193

08/12/15--01022--015 **125.00

SECRETARY OF STATES
TALLAHISSEE, FLORIDA
15 AUG 12 AH 11: 58

8/18/1- -

COVER LETTER

SUBJECT	Orlando Urgent Care, LLC	
SUBJECT	Name of Limited Liability Company	
The enclose	osed Articles of Organization and fee(s) are submitted for filing.	
Please retur	urn all correspondence concerning this matter to the following:	
	James B. Bogner, Esquire	
	Name of Person	
	Mateer & Harbert, P.A.	
	Firm/Company	
	225 E. Robinson Street, Suite 600	
	Address	
	Orlando, FL 32801	
J	City/State and Zip Code JBogner@mateerharbert.com	
_	E-mail address: (to be used for future annual report notification)	
For further in	information concerning this matter, please call:	
,	James B. Bogner 407 425-9044 at ()	
-	Name of Person Area Code Daytime Telephone Nur	mber
Enclosed is	is a check for the following amount:	
\$125.00 Fil	Certificate of Status Certified Copy (additional copy is enclosed)	160.00 Filing Fee, Certificate of Status & Certified Copy ditional copy is enclose
	Mailing Address Street Address	
	New Filing Section New Filing Section Division of Corporations Division of Corporations	

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

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

ARTICLES OF ORGANIZATION OF ORLANDO URGENT CARE, LLC

ARTICLE I - NAME

The name of this limited liability company is Orlando Urgent Care, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 1414 Kuhl Avenue, MP 2, Attn: Mildred D. Beam, Orlando, FL 32806.

ARTICLE III - REGISTERED OFFICE AND AGENT

The street address of the registered office of the Company is 1414 Kuhl Avenue, MP 2, Orlando FL 32806 and the name of the registered agent at that address is Mildred D. Beam.

ARTICLE IV - SOLE MEMBER AND MANAGEMENT

The sole member of the Company is West Orange Physicians Group, LLC, a Florida limited liability company. The Company is to be managed by its member.

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of registered agent: Mildred D. Beam

Wilder Bear

mildua Bean

ARTICLE V - EFFECTIVE DATE

These Articles of Organization shall be effective on the date of filing.

Signed July 31, 2015

Mildred D. Beam – authorized representative