

L15000162680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name not available
L13000 38 843
W15-28091

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04/10/15--01027--019 **160.00

FILED
15 SEP 18 AM 7:12
SECRETARY OF STATE
ALABAMA

SEP 24 2015

W PAINTER

September 21, 2015

Westlee A. Painter
Regulatory Specialist II
(Tel. 850-245-6836)

Florida Department of State
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RECEIVED SEP 23 2015

Dear Ms. Painter,

We are in receipt of your letter dated April 23, 2015 where the business name previously selected was rejected since there is an existing entity with the same name.

We have now selected "Health-Lync, LLC as the new name for our business entity and decided to remove my husband, Esau Guptar from the application and place the entire entity under my name.

If you have any concerns, I can be reached at 954-655-9127.

Best Regards,



Rani Guptar
Health-Lync, LLC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 23, 2015

ESAU I. GUPTAR
1131 N. 74TH TERRACE
HOLLYWOOD, FL 33024

SUBJECT: HEALTH-MED, LLC
Ref. Number: W15000028691

We have received your document for HEALTH-MED, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 242-6051.

WESTLEE A PAINTER
Regulatory Specialist II

Letter Number: 215A00008285

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Health-Lync, 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:

Rani Gupta

Name of Person

Health-Lync, LLC

Firm/Company

1131 N. 74th Terrace

Address

Hollywood, Florida 33024

City/State and Zip Code

rguptar@bellsouth.net

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

For further information concerning this matter, please call:

Rani Gupta

954

655-9127

at (_____) _____

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

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

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Health-Lync, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

1131 N. 74th terrace
Hollywood, Florida 33024

Mailing Address:

1131 N. 74th Terrace
Hollywood, Florida 33024

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Rani Gupta

Name

1131 N. 74th terrace

Florida street address (P.O. Box **NOT** acceptable)

Hollywood

Florida

33024Mgr

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 605, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

15 SEP 18 AM 7:15
OFFICE OF THE
CLERK OF THE
SOUTH FLORIDA
COURTS

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Mgr

Name and Address:

Rani Guptar

1131 N. 74th Terrace

Hollywood, Florida 33024

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

Reference #: W15000028691

REQUIRED SIGNATURE:

Rani Guptar

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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 s.817.155, F.S.

Rani Guptar

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

15 SEP 18 AM 7:15
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DEPT. OF STATE
FILING