

3/2/2016

L16000042600

Division of Corporations
Florida Department of State
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000054846 3)))



H160000548463ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : HILL WARD HENDERSON
Account Number : 072100000520
Phone : (813)221-3900
Fax Number : (813)200-5995

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: kwiebeck@bks-partners.com

**FLORIDA LIMITED LIABILITY CO.
BRP Medicare Insurance III, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

16 MAR -2 AM 11:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

((H16000054846 3)))

ARTICLES OF ORGANIZATION

OF

BRP MEDICARE INSURANCE III, LLC

The undersigned executes these Articles of Organization of BRP Medicare Insurance III, LLC to form a limited liability company pursuant to the Florida Revised Limited Liability Company Act:

ARTICLE I. NAME

The name of the limited liability company is: BRP Medicare Insurance III, LLC:

ARTICLE II. ADDRESS

The mailing and street address of the principal office of the limited liability company is 4010 W. Boy Scout Blvd., Suite 200, Tampa, FL 33607.

ARTICLE III. REGISTERED AGENT AND OFFICE

The street address of the initial registered office of the limited liability company is 4010 W. Boy Scout Blvd., Suite 200, Tampa, FL 33607, and the name of the limited liability company's initial registered agent at that address is Elizabeth Krystyn.

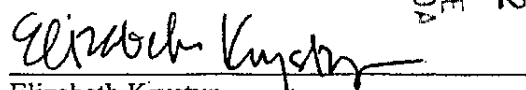
Having been named to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Elizabeth Krystyn

ARTICLE IV. MANAGEMENT OF COMPANY

The limited liability company is a manager-managed limited liability company

EXECUTED: 3.2, 2016


Elizabeth Krystyn,
Authorized Representative of Member

16 MAR -2 AM 11:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA