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#### FLORIDA LIMITED LIABILITY CO.

#### Medclear Solutions, LLC

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I of I

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#### ARTICLES OF ORGANIZATION

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**OF** 

# MEDCLEAR SOLUTIONS, LLC

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

### ARTICLE 1 NAME

The name of this Limited Liability Company is:

MEDCLEAR SOLUTIONS, LLC

# ARTICLE II ADDRESS

The street address and mailing address of the principal office is:

2328 10<sup>th</sup> Avenue N., Suite 301 Lake Worth, FL 33461

# ARTICLE III CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

John White II 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401 Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

John White II, Registered Agent

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 

| May of April, 2016. | |

John White II, Authorized Representative of the Members

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