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Division of Corporations

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From:

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Account Number : 102200001064 Phone

: (727)507-9559

Fax Number

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FLORIDA LIMITED LIABILITY CO.

Knightsbridge Teleservices, PLLC

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June 2, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DOUGLAS L. HILKERT

SUBJECT: KNIGHTSBRIDGE TELESERVICES, PLLC

REF: W16000039913

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A brief description of the entity's nature of business must be included in the document.

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) 245-6052.

Nadira D McClees-Sams Regulatory Specialist II FAX Aud. #: B16000133308 Letter Number: 416A00011503

FAX Audit Number H16000133308 3

ARTICLES OF ORGANIZATION OF PROFESSIONAL LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name and Purpose:

The name of the Professional Limited Liability Company is:

Knightsbridge Teleservices, PLLC

The Professional Limited Liability Company's purpose is to provide medical services.

ARTICLE II — Address:

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

3033 Wentworth Way Tarpon Springs, FL 34688

ARTICLE III — Registered Agent and Registered Office:

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

Douglas L. Hilkert P.A. 2557 Nursery Road Suite A Clearwater, Florida 33764

Having been named as Registered Agent and to accept service of process for the above stated Professional 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

Prepared by:
Douglas L. Hilkert, Esq.
DOUGLAS L. HILKERT P.A.
2557 Nursery Road Suite A
Clearwater, FL 33764
(727) 507-9559
FBN 981850

Section And the SIME

FAX Audit Number H16000133308 3

familiar with and accept the obligations of my position as Registered Agent as provided for in Chapter 605, F.S.

Douglas L. H

Douglas L. Hilkert, Its President

ARTICLE IV — Operating Agreement:

Any Operating Agreement, as defined in s. 605.0102(45), F.S., relating to this Professional Limited Liability Company must be in writing and signed by all of the members.

ARTICLE V — Effective Date:

The Effective Date of the Professional Limited Liability Company is May 27, 2016.

In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Douglas L. Hilkert

Authorized Representative