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ACCOUNT FILING COVER SHEET

Account Number FCA000000017

Date:

6-27-16

Requestor Name: Carlton Fields

Address: Post Office Drawer 190
Tallahassee, Florida 32302

Telephone: (850) 513-3619 - direct
(850) 224-1585

Contact Name: Kim Pullen, CP, FRP

Corporation Name:

Will Profit, LLC

Email Address:

jcoaris@jupiteemed.com

Entity Number:

Authorization:

Kim Pullen

☐ Certified Copy

☒ New Filings

☐ Fictitious Name

☒

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☐ Amendments

☐ Certificate of Status

☐ Annual Report

☐ Registration

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Client: 55630 Matter: 54022

Name: L. Goodwin Office: TPA

**ARTICLES OF ORGANIZATION
OF
WILL PROFIT, LLC**

The undersigned, as the authorized representative of the organizing member of a limited liability company under the Florida Revised Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company (the "Company"):

ARTICLE I

Name

The name of the Company is Will Profit, LLC.

ARTICLE II

Initial Principal Office Street and Mailing Address

The Company's initial principal office street address is 11600 Sandy Run Road, Jupiter, Florida 33478 and the mailing address is 11600 Sandy Run Road, Jupiter, Florida 33478.

ARTICLE III

Initial Registered Agent and Office

The name of the initial registered agent of the Company is John Couris and the street address is 2627 West Community Drive, Jupiter, Florida 33458. The mailing address is 2627 West Community Drive, Jupiter, Florida 33458.

ARTICLE IV

Organizing Member

The name of the organizing member of the Company is Benjamin Couris.

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ARTICLE V
Authorized Representative

The name and address of the authorized representative of the organizing member are:

Name


Address

John Couris

2627 West Community Drive
Jupiter, Florida 33458

Dated this 20th day of June 2016.

Authorized Representative:



John Couris

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ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the duties and obligations of its position as registered agent.

Dated this 20th day of June 2016.

REGISTERED AGENT:

By: _____

John Court

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