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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Farley Ortho LCC 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:
Alexander Ross Farley Name of Person
Farley Ortho LLC Firm/Company
2110 Royal Fern Ct. Address
Congwood FL 32779 City/State and Zip Code Farleya7@gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alex Farley at 407 739-3496 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 Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabili	ty Company is:		
Farley	Ortho	LLC	
(Must end	with the words "Limited	Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:	<u>Mailing Address</u> :
2110 Royal Fern Ct.	2110 Royal Fern Ct.
Longwood FL 32779	Long wood EL 32779
	7

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:

Alexander	R	loss	Farle	.у
	Name			t
2110 RO	yal	Fern	C+	•
Florida street address (P.O. Bo	x <u>NOT</u> a	cceptable)	
Longwood City	FI		32	779
City	Stat	te	7	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)

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Alex Farley 2116 Royal Fern Ct. Congewood PL 32779
216 Royal Fern Ct.
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n authorized representative of a member. rdance with section 605.0203 (1) (b), Florida Statutes.
n authorized representative of a member.
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ARTICLE IV-