Division of Corporations **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.

(((H170000306593)))



H170000306593ABC+

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 : LAW OFFICES OF PAUL A. LESTER, P.A.

Account Number : I20110000058 Phone : (305) 350-5344

Fax Number ` : (305)373-2294

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

Email Address: MBUONICONTI @Med. MIAHI. eQU

FLORIDA LIMITED LIABILITY CO.

WELL MANAGED HEALTH CARE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

N. SAMS FEB 0 2 2017

Electronic Filing Menu

Corporate Filing Menu

Help

2/3

H17000030659

ARTICLES OF ORGANIZATION

OF

WELL MANAGED HEALTH CARE, LLC

<u>ARTICLE I - NAME</u>

The name of this Limited Liability Company is WELL MANAGED HEALTH CARE, LLC.

ARTICLE II - EXISTENCE

The existence of this Company shall commence on the day of filing these Articles of Organization. The duration of the Company shall be perpetual.

<u>ARTICLE III - PRINCIPAL OFFICE</u>

The Company's principal office shall initially be located at 60 Edgewater Drive, Unit 9D, Coral Gables, Florida, 33133. The Company's mailing address shall, initially, be located at the same address.

ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Company and the name of the initial registered agent of this Company at such address are as follows:

STREET ADDRESS OF

REGISTERED AGENT REGISTERED OFFICE

Marc Buoniconti 60 Edgewater Drive, Unit 9D

Coral Gables, Florida, 33133

ARTICLE V - MANAGEMENT

The Company shall be a manager managed limited liability company. The initial manager is:

MANAGER ADDRESS

Marc Buoniconti 60 Edgewater Drive, Unit 9D

Coral Gables, Florida, 33133

In accordance with Chapter 605, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Marc Buoniconti, Manager

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, I hereby accept the appointment as registered agent and agree to act in that 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 Florida Statutes, Chapter 605.

Marc Buoniconti, Registered Agent