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17 JUL 17 AH 9: 50 SECRETARY OF STATE

COVER LETTER

	ew Filing Section vision of Corporations	
SUBJECT	EQU-PULSE	LLC. mited Liability Company
	Name of Li	imited Liability Company
The enclose	ed Articles of Organization and fee(s) a	are submitted for filing.
Please retur	rn all correspondence concerning this n	natter to the following:
	LAURIE	Sammons Name of Person
		Name of Person
		E. 10
		Firm/Company
	20450 Cha	Pel Trace Address
		Address
	ESTERO	FL 33928 City/State and Zip Code
	_	•
_	E-mail address: (to be use	d for future annual report notification)
For further in	formation concerning this matter, plea	•
r or rariner n	normation concerning this matter, preu	3. Cuii.
!	Laurie Sammons at (
	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
\$125.00 Fi	ling Fee \$\int \text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address
	New Filing Section	New Filing Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:			
Edu- (Must conta	Polse LLC.	iability Company	. "L.L.C" or "LLC.")	
ARTICLE II - Address: The mailing address and street ad				
<u>Principa</u>	al Office Address:		Mailing Address	ş:
20450 Ch ESTERO, F	Apel Trace =L 33928		Same	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own F	Registered Agent.		idual or
The name and the Florida street a	-	,		
	LAUVIE	Sammon	Ś	
		Name		JA S
	20450	Chapel -	Trace	7 J
	Florida street address			
	ESTERO	FL	33928	TARY OF ST ASSEE, FLO
	ESTERO City	State	Zip	ुन 😤 📭
laving been named as registered a clace designated in this certificate, arther agree to comply with the pr am familiar with and accept the ob	ligations of my position a.	s registered agent	te above stated limited liability red agent and agree to act in te er and complete performance of as provided for in Chapter 60 Manager 12	y company it the this capitally. 6 of my duties, and l

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Laurie Sammons
	20450 Chapel Trace
	ESTERO FL 33928
MbR	FREDERICK SAMMONS
	20450 Chapel Trace
	
(Use attachment if necessary)	
EV: Effective date, if other than the date of ective date is listed, the date must be speciof filing.) If the date inserted in this block does not me	f filing: Aug. 1, 2017 . (OPTIONAL) ific and cannot be more than five business days prior to or 90 of the applicable statutory filing requirements, this date will not be stated as records.
JEV: Effective date, if other than the date of fective date is listed, the date must be speciof filing.) If the date inserted in this block does not mement's effective date on the Department of	et the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the date of fective date is listed, the date must be speciof filing.) If the date inserted in this block does not mement's effective date on the Department of EVI: Other provisions, if any.	et the applicable statutory filing requirements, this date will not be
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JEV: Effective date, if other than the date of fective date is listed, the date must be specifiling.) If the date inserted in this block does not mement's effective date on the Department of JEVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a memeral and a many many many many many many many ma	et the applicable statutory filing requirements, this date will not be state's records. State's records. There or an authorized representative of a member. If in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State belony as provided for in s.817.155, F.S.