Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO.

Nykan Medical LLC

Certificate of Status	0		
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Help

ARTICLES OF ORGANIZATION **OF** Nykan Medical LLC

ARTICLE I

NAME

The name of the limited liability company is: Nykan Medical LLC

ARTICLE II

ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be: 12502 Eagles Entry Dr., Odessa, Florida 33556.

INITIAL REGISTERED AGENT & STREET ADDRESS ARTICLE III

The name and address of the registered agent are: John Nye, 12502 Eagles Entry Dr., Odessa, Florida 33556. Located in the County of Hillsborough.

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.

Signature:

Date: 8/2/2017

ARTICLE IV

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the names and addresses of the members of the Limited Liability Company are:

John Nye, 12502 Eagles Entry Dr., Odessa, Florida 33556 Adria Nye, 12502 Eagles Entry Dr., Odessa, Florida 33556

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ARTICLE V

DURATION

The duration for the limited liability company shall be: Perpetual.

Date: 8/2/2017

Authorized Representative

(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.)

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