

L700024691

Florida Department of State  
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.

(((H170003152173)))



H170003152173AEC.

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 : LOWNDES, DROSDICK, DOSTER, KANTOR &amp; REED, P.A.

Account Number : 072720000036

Phone : (407) 843-4600

Fax Number : (407) 843-4444

*Tami Passley*

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

Email Address: \_\_\_\_\_

## FLORIDA LIMITED LIABILITY CO.

## Health Holding II, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

FILED  
2017 DEC - 1 PM 1:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
*M. Page*

H170003152173

ARTICLES OF ORGANIZATION  
OF  
HEALTH HOLDING II, LLC

ARTICLE I - NAME

The name of this limited liability company is Health Holding II, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

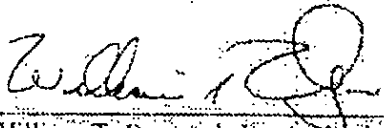
The mailing address and street address of the principal office of the Company is 2043 Jacobs Place, Orlando, Florida 32805.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is William T. Dymond, Jr.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company and the initial manager of the Company is LIFT Orlando Impact Investment Fund Manager, LLC, a Florida limited liability company.

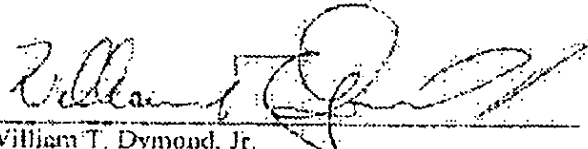
  
William T. Dymond, Jr., Authorized Representative  
of Member

2017 DEC - 1 PM 1:12  
SECRETARY OF STATE  
TELEPHASE  
FLORIDA

FILED

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

  
William T. Dymond, Jr.