# Electronic Articles of Organization For Florida Limited Liability Company

L18000085427 FILED 8:00 AM April 04, 2018 Sec. Of State jafason

## **Article I**

The name of the Limited Liability Company is:
WOUND CARE CONSULTANTS OF FLAGLER LLC

#### **Article II**

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

21 HOSPITAL DRIVE 280 PALM COAST, FL. UN 32164

The mailing address of the Limited Liability Company is:

21 HOSPITAL DRIVE 280 PALM COAST, FL. UN 32164

### Article III

Other provisions, if any:

ANY LEGAL PURPOSE

## **Article IV**

The name and Florida street address of the registered agent is:

SHARON LEVENTHAL 21 HOSPITAL DRIVE 280 PALM COAST, FL. 32164

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.

Registered Agent Signature: SHARON LEVENTHAL

## **Article V**

The name and address of person(s) authorized to manage LLC:

Title: MGR SHARON LEVENTHAL 21 HOSPITAL DRIVE STE 280 PALM COAST, FL. 32164 UN

Title: MGR JOSEPH DI CAPUA 8100 ROYAL PALM BLVD STE 102 CORAL SPRINGS, FL. 33065 US

Signature of member or an authorized representative

Electronic Signature: JOSEPH DI CAPUA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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