

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L19000002044
FILED 8:00 AM
December 28, 2018
Sec. Of State
dlokeefe**

Article I

The name of the Limited Liability Company is:

PANAMA CITY VASCULAR CENTER PLLC

Article II

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

1811 WEAKFISH WAY, #27264
PANAMA CITY BEACH, FL. US 32411

The mailing address of the Limited Liability Company is:

1811 WEAKFISH WAY, #27264
PANAMA CITY BEACH, FL. US 32411

Article III

Other provisions, if any:

VASCULAR SURGERY CLINIC SERVICES PROVIDED BY A LICENSED
MEDICAL DOCTOR

Article IV

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

ASHISH GUPTA
1811 WEAKFISH WAY, #27264
PANAMA CITY BEACH, FL. 32411

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: ASHISH GUPTA

Article V

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

Title: AMBR
ASHISH GUPTA
1811 WEAKEFISH WAY, #27264
PANAMA CITY BEACH, FL. 32411 US

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Signature of member or an authorized representative

Electronic Signature: CHEYENNE MOSELEY, LEGALZOOM.COM, INC.

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.