# Electronic Articles of Organization For Florida Limited Liability Company

L19000027589 FILED 8:00 AM January 28, 2019 Sec. Of State jafason

## **Article I**

The name of the Limited Liability Company is: WELLSPAN MEDICAL SERVICES, LLC

#### **Article II**

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

599 NINTH STREET NORTH SUITE 308 NAPLES, FL. 34102

The mailing address of the Limited Liability Company is:

599 NINTH STREET NORTH SUITE 308 NAPLES, FL. 34102

# **Article III**

Other provisions, if any:

THE PURPOSE IS TO ENGAGE IN THE PRACTICE OF MEDICINE WITH ALL OF THE ROLES AND RESPONSIBILITIES THAT MAY ENTAIL

# **Article IV**

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

MARCEY NOTTINGHAM 599 NINTH STREET NORTH SUITE 308 NAPLES, FL. 34102

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: MARCEY NOTTINGHAM

## **Article V**

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

Title: MGR

JOSEPH J REPAY MD

599 NINTH STREET NORTH, STE 308

NAPLES, FL. 34102

Signature of member or an authorized representative

Electronic Signature: JOSEPH J REPAY, MD

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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