

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

L19000166202  
FILED 8:00 AM  
June 25, 2019  
Sec. Of State  
kepage

**Article I**

The name of the Limited Liability Company is:  
206 SURGICAL DISTRIBUTORS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
6261 POWERS AVE  
JACKSONVILLE, FL. 32217

The mailing address of the Limited Liability Company is:  
6261 POWERS AVE  
JACKSONVILLE, FL. 32217

**Article III**

The name and Florida street address of the registered agent is:  
DAVID M RUSSO  
3754 BURNT PINE DRIVE  
JACKSONVILLE, FL. 32224

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: DAVID RUSSO

## **Article IV**

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

Title: AMGR  
WALTER A MCCANN  
473 N BRIDGESTONE AVE  
ST. JOHNS, FL. 32259 US

Title: AMBR  
DAVID M RUSSO  
3754 BURNT PINE DRIVE  
JACKSONVILLE, FL. 32224

**L19000166202**  
**FILED 8:00 AM**  
**June 25, 2019**  
**Sec. Of State**  
kepage

Signature of member or an authorized representative

Electronic Signature: DAVID RUSSO

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.