

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : MARKS GRAY, P.A.
Account Number : 120040000191
Phone : (904) 398-0900
Fax Number : (904) 399-8440

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

Email Address: ecarter@marksgray.com

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OCT 11 2019

FLORIDA LIMITED LIABILITY CO.
Complete Health Enterprises, LLC

Certificate of Status	0
Certified Copy	0
Page Count	60
Estimated Charge	\$125.00

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October 10, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MARKS GRAY, P.A.

SUBJECT: COMPLETE HEALTH ENTERPRISES, LLC
REF: W19000090288

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please list the complete principal office address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H19000300766
Letter Number: 419A00020819

PLEASE SEE THE RESUBMITTED ARTICLES OF ORGANIZATION. THE MAILING ADDRESS WAS PROVIDED AND IT WAS INDICATED THAT THE PRINCIPAL ADDRESS IS THE SAME. PER YOUR REQUEST, WE HAVE LISTED BOTH SEPERATELY. PLEASE LET US KNOW IF YOU REQUIRE ANYTHING ADDITIONAL. THANKS!!! Elizabeth.

P.O. BOX 6327 - Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION
OF
COMPLETE HEALTH ENTERPRISES, LLC**

FILED
2019 OCT 10 AM 11:34
SECRETARY OF STATE
JACKSONVILLE, FL

We, the undersigned, hereby execute these Articles of Organization for the purpose of organizing a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of the limited liability company is COMPLETE HEALTH ENTERPRISES, LLC.

ARTICLE II

The mailing address of the limited liability company shall be 130 Gateway Circle, Jacksonville, FL 32259, and its principal street address is 130 Gateway Circle, Jacksonville, FL 32259.

ARTICLE III

The business purpose of the limited liability company is to engage in any lawful act or activity which may be carried on by limited liability companies in the State of Florida and, in connection therewith, the limited liability company shall have and may use, exercise and enjoy, all the powers of limited liability companies conferred by the limited liability company laws of the State of Florida.

ARTICLE IV

The address of the initial registered office of this limited liability company in Florida shall be 1200 Riverplace Blvd., Suite 800, Jacksonville, Florida 32207, and its initial registered agent at that address shall be Fred H. Kent, III. The Board of Managers may, from time to time, change the registered office and registered agent of the limited liability company upon notification to the proper authorities.

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ARTICLE V

The limited liability company shall have perpetual existence.

ARTICLE VI

The limited liability company shall be managed by a Board of Managers, who shall be elected or designated by the members in accordance with the operating agreement governing the limited liability company. The number of the Managers of this limited liability company shall be not less than one (1) nor more than five (5), as fixed from time to time by the provisions of the operating agreement.

ARTICLE VII

The name and address of the sole member of the first Board of Managers, who, subject to the provisions of the operating agreement and these Articles of Organization, shall hold office until his successors are elected and have qualified pursuant to the operating agreement is as follows:

<u>Name</u>	<u>Street Address</u>
Jason D. Lewis, DDS, FAGD	130 Gateway Circle Jacksonville, Florida 32259

ARTICLE VIII

The names and addresses of the subscribers to these Articles of Organization, who are both authorized representatives of the limited liability company and its members, are as follows:

<u>Name</u>	<u>Street Address</u>
Fred H. Kent, III	1200 Riverplace Blvd., Suite 800 Jacksonville, FL 32207
Elizabeth A. Carter	1200 Riverplace Blvd., Suite 800 Jacksonville, FL 32207

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officer is a member or employee, or any limited liability company or corporation of which any such Manager or officer is an officer, director, manager, member, stockholder or employee, has any interest in such contract, transaction or act, whether or not adverse to the interest of this limited liability company, even though the vote of the Manager(s) or officer(s) having such interest shall have been necessary to obligate this limited liability company upon such contract, transaction or act; and no Manager or officer having such interest shall be liable to this limited liability company or to any member or creditor thereof or to any other person for any loss incurred by it under or by reason of any such contract, transaction or act; nor shall any such Manager or officer be accountable for any gains or profits realized thereon.

ARTICLE X

This limited liability company reserves the right to amend, alter, change or repeal any provisions contained herein in the manner now or hereafter prescribed by law, and all rights conferred on members herein are granted subject to this reservation.

IN WITNESS WHEREOF, we, the undersigned subscribing members or authorized representatives of the limited liability company, have hereunto set our hands and seals for the purpose of organizing this limited liability company under the laws of the State of Florida, and we hereby make, subscribe, acknowledge and file in the office of the Secretary of State of the State of Florida these Articles of Organization and certify that the facts herein stated are true, all on this 9th day of October, 2019.


Fred H. Kent, III (SEAL)


Elizabeth A. Carter (SEAL)

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ARTICLE IX

In furtherance and not in limitation of the powers conferred by statute, the following specific provisions are made for the regulation of the business and the conduct of the affairs of the limited liability company:

(1) Subject to such restrictions, if any, as are herein expressed and such further restrictions, if any, as may be set forth in the operating agreement, the Managers shall have the general management and control of the business and may exercise all of the powers of the limited liability company, except such as may be by statute, or by the operating agreement as constituted from time to time, expressly conferred upon or reserved by the members.

(2) Subject always to such operating agreement as may be adopted from time to time by the members, the Board of Managers is expressly authorized to adopt, alter and amend the operating agreement of the limited liability company, but any provision thereof adopted, altered or amended by the Managers may be altered, amended or repealed by the members.

(3) The limited liability company shall have such officers as from time to time may be provided in the operating agreement and such officers shall be designated in such manner and shall hold their offices for such terms and shall have such powers and duties as may be prescribed by the operating agreement or as may be determined from time to time by the Board of Managers, subject to the operating agreement.

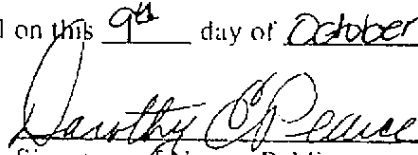
(4) No Manager or officer of this limited liability company shall, in the absence of fraud, be disqualified by his or her office from dealing or contracting with this limited liability company either as vendor, purchaser or otherwise, nor, in the absence of fraud, shall any contract, transaction or act of this limited liability company be void or voidable or affected by reason of the fact that any such Manager or officer, or any firm of which any such Manager or

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STATE OF FLORIDA
COUNTY OF DUVAL

Before me personally appeared this day Fred H. Kent, III, and Elizabeth A. Carter, the parties to the foregoing Articles of Organization, who are personally known to me and to me known to be the individuals described in and who executed the foregoing Articles of Organization, and who acknowledged before me that they made, subscribed and acknowledged the foregoing Articles of Organization as their voluntary act and deed as members or authorized representatives of said limited liability company, and that the facts set forth therein are true and correct.

WITNESS my hand and official seal on this 9th day of October, 2019.



Signature of Notary Public
Notary Public, State and County aforesaid
My commission expires: _____

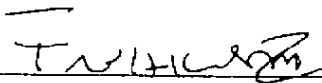
(Notarial Seal)



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ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for Complete Health Enterprises, LLC, a Florida limited liability company, at the place designated in the Articles of Organization of said limited liability company, I hereby accept such appointment and agree to act in this capacity, and agree to comply with the provisions of law relating to keeping said office open. I further acknowledge that I am familiar with, and accept, the obligations imposed upon registered agents of limited liability companies.



Fred H. Kent, III, Registered Agent