

L19000262408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

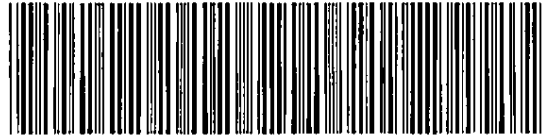
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

2019 OCT 31 PM 2:04

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**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

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236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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**WALK IN**

**PICK UP:** 10/30/2019

- CERTIFIED COPY** \_\_\_\_\_
- PHOTOCOPY** \_\_\_\_\_
- CUS** \_\_\_\_\_
- FILING** **ARTICLES** \_\_\_\_\_

1. **MSSP MOB 1, LLC**  
\_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL INSTRUCTIONS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
MSSP MOB 1, LLC**

The undersigned, being the Members and Organizers of the Limited Liability Company hereby being formed under the Florida Statutes Annotated Sections 605.0201, do hereby adopt the following Articles of Organization for the Limited Liability Company:

**FIRST:** The name of the Limited Liability Company is MSSP MOB 1, LLC

**SECOND:** The Limited Liability is organized to engage in any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company may be organized in accordance with the Florida Statutes Annotated Sections 605.0201, including all powers and purposes now and hereafter permitted by law to a limited liability company.

**THIRD:** The mailing address and street address of the principal office of the Limited Liability Company is 1540 Citrus Medical Ct, Ocoee, FL 34761.

**FOURTH:** The street address of the initial registered office of the Limited Liability Company in Florida is 1540 Citrus Medical Ct, Ocoee, FL 34761 and the name of the Initial registered agent of the Limited Liability Company in Florida at that address is Surabhi Singh.

**FIFTH:** The members of the Limited Liability Company shall consist of not less than one Member. The name and address of the initial Members are:

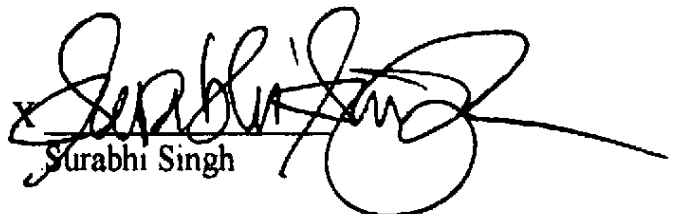
Sanjeev Singh (AMBR)  
11300 Bridge House Rd  
Windermere, FL 34786

Surabhi Singh (AMBR)  
11300 Bridge House Rd  
Windermere, FL 34786

**FIFTH:** The Limited Liability Company is to be managed by the Members.

**IN WITNESS WHEREOF**, the Members have executed and acknowledged these Articles of Organization on October 30, 2019.

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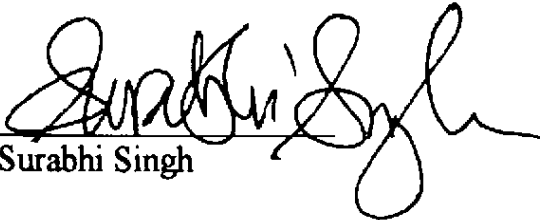
  
Surabhi Singh

**CONSENT TO APPOINTMENT  
BY REGISTERED AGENT**

I, having been named as Registered Agent for MSSP MOB 1, LLC hereby voluntarily consent to serve as Registered Agent for MSSP MOB 1, LLC

I know and understand the duties and responsibilities of a Registered Agent as set forth in the Florida Statutes Annotated Sections 605.0201, and I hereby accept those duties and responsibilities.

Dated: October 30, 2019

X   
Surabhi Singh