

U19000283205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

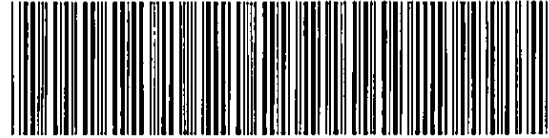
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400337501144

12/02/19--01003--010 **125.00

19 DEC -2 11:58

2019 DEC -2 PM 2:01

STATE BAR OFFICE
TALLAHASSEE, FLORIDA

FILED

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

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

WALK IN

PICK UP: 12/02/2019

- ☐ **CERTIFIED COPY** _____
- xx** **PHOTOCOPY** _____
- ☐ **CUS** _____
- xx** **FILING** LLC _____

1. **DEPENDABLE HEALTH SERVICES, 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
DEPENDABLE HEALTH SERVICES, 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 DEPENDABLE HEALTH SERVICES, 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 15503 Sandfield Loop, Winter Garden, FL 34787.

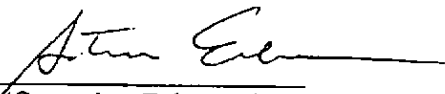
FOURTH: The street address of the initial registered office of the Limited Liability Company in Florida is 15503 Sandfield Loop, Winter Garden, FL 34787 and the name of the Initial registered agent of the Limited Liability Company in Florida at that address is Saturnino Echeverria.

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:

Saturnino Echeverria (AMBR)
15503 Sandfield Loop
Winter Garden, FL 34787

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 November 26, 2019.

X 
Saturnino Echeverria

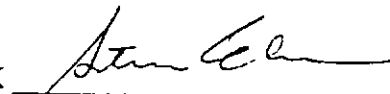
FILED
2019 DEC -2 PM 2:01
STATE
TALLAHASSEE, FLORIDA

**CONSENT TO APPOINTMENT
BY REGISTERED AGENT**

I, having been named as Registered Agent for DEPENDABLE HEALTH SERVICES, LLC hereby voluntarily consent to serve as Registered Agent for DEPENDABLE HEALTH SERVICES, 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: November 26, 2019

X 

Saturnino Echeverria