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To: Division of Corporations  
Fax Number : (850) 617-6381  
  
From: Account Name : SHUTTS & BOWEN, LLP  
Account Number : 076447000313  
Phone : (305) 358-9166  
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Email Address: ASmith@shutts.com

FLORIDA LIMITED LIABILITY CO.  
Maximus Medical LLC

Certificate of Status	0
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2020 JUN 23

T. SCOTT

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

Maximus Medical LLC

ARTICLE II - Address

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

200 S. Biscayne Blvd  
Suite 4100 (AGS)  
Miami Florida 33131

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

200 S. Biscayne Blvd  
Suite 4100 (AGS)  
Miami Florida 33131

ARTICLE III - Management

The limited liability company shall be managed by one or more managers (who shall be designated "Manager(s)") and is, therefore, a manager-managed company within the meaning of Section 605.0407, Florida Statutes. The rights, duties and obligations of the Manager(s) and the Member(s) of the limited liability company shall be as set forth in writing in the agreement(s) of the Member(s).

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**ARTICLE IV - Registered Agent and Office**

The name and street address of the initial registered agent of the Limited Liability Company are:

CORPORATION COMPANY OF MIAMI  
200 S. Biscayne Blvd  
Suite 4100 (AGM)  
Miami, Florida 33131

**REGISTERED AGENT ACCEPTANCE**

Having been named as registered agent to accept service of process for the above-stated limited liability company at the address designated in the Articles of Organization, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its duties and is familiar with and accepts the obligations of its position as registered agent, as provided for in Chapter 605, Florida Statutes.

Date: June 22, 2020

CORPORATION COMPANY OF MIAMI.  
a Florida corporation

By: \_\_\_\_\_  
Name: Alfred G. Smith  
Title: President

IN WITNESS WHEREOF, the undersigned has signed these Articles of Organization this 22<sup>nd</sup> day of June, 2020.

\_\_\_\_\_  
Alfred G. Smith, Authorized Representative

(This document is executed in accordance with Section 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Florida Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.)