

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

L20000212094
FILED 8:00 AM
July 24, 2020
Sec. Of State
mtmoon

Article I

The name of the Limited Liability Company is:

DEBRA G KENWARD, M.D., LLC

Article II

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

6141 SUNSET DRIVE
SUITE 401
SOUTH MIAMI, FL. US 33143

The mailing address of the Limited Liability Company is:

6141 SUNSET DRIVE
SUITE 401
SOUTH MIAMI, FL. US 33143

Article III

The name and Florida street address of the registered agent is:

HERSKOWITZ SHAPIRO PLLC
9130 S. DADELAND BLVD.
1609
MIAMI, FL. 33156

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: GREG HERSKOWITZ

Article IV

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

Title: AMBR
DEBRA G KENWARD
6141 SUNSET DRIVE, #401
SOUTH MIAMI, FL. 33143 US

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Article V

The effective date for this Limited Liability Company shall be:

07/20/2020

Signature of member or an authorized representative

Electronic Signature: GREG HERSKOWITZ

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.


L200050212094

Affidavit

Before me, the undersigned authority, duly authorized to take acknowledgments and administer oaths, personally appeared DEBRA G. KENWARD ("Affiant"), who, after being by me first duly sworn, depose(s) and say(s) that:

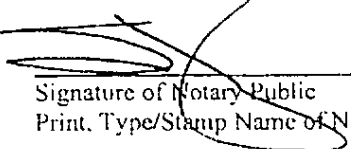
1. Affiant is the President of Debra G. Kenward M.D., P.A. and has personal knowledge of the facts herein.
2. Affiant states that she has no intention of reinstating the Debra G. Kenward M.D., P.A. entity.
3. Affiant is familiar with the nature of an oath and with the penalties as provided by the laws of the State of Florida for falsely swearing to statements in an instrument of this nature. Affiant affirms he/she has read the foregoing affidavit and fully understands the facts contained herein.

Under penalties of perjury, I declare that I have read the foregoing Affidavit and that the facts stated in it are true.


Debra G. Kenward

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me by means of () physical presence or () online notarization this 23rd day of July, 2020, by Debra G. Kenward.


Signature of Notary Public
Print, Type/Stamp Name of Notary

Susan Manson



SUSAN MANSON
Commission # GG 132762
Expires August 8, 2021
Bonded Thru Budget Notary Services

Personally Known: _____ OR Produced Identification: ☒
Type of Identification
Produced: FL Driver License