

L200-00295030

9/28/2020

Division of Corporations

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Email Address: mlandi@invisionhealth.com

FLORIDA LIMITED LIABILITY CO.
Invision Health Florida, LLC

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**ARTICLES OF ORGANIZATION
OF
INVISION HEALTH FLORIDA, LLC**

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company shall be Invision Health Florida, LLC.

ARTICLE II

The mailing address and street address of the principal office of the limited liability company shall be 400 International Drive, Williamsville, NY 14221, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is 515 East Park Avenue, 2nd Floor, Tallahassee, FL 32301. The initial registered agent at that address is Capitol Corporate Services, Inc.


ARTICLE IV

The limited liability company shall be manager-managed. The initial manager of the limited liability company is Michael Landi, M.D.

ARTICLE V

This limited liability company shall commence its existence as of the filing hereof and shall exist perpetually thereafter unless sooner dissolved.

IN WITNESS WHEREOF, the undersigned authorized representative has executed these Articles of Organization as of September 24th, 2020.



Michael Landi, M.D., Authorized Representative

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 605.0113, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST -- The name of the limited liability company is Invision Health Florida, LLC.

SECOND -- The name and address of the registered agent and office is:

Capitol Corporate Services, Inc.
515 East Park Avenue, 2nd Floor
Tallahassee, FL 32301

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.

Dated as of the 28th day of September, 2020

Capitol Corporate Services, Inc., Registered Agent

By: Kim Tadlock
Name: Kim Tadlock
Title: Asst. Sec. on behalf of Capitol Corporate Services, Inc.

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