

3/9/2021

L21000099250

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000095656 3)))



H210000956563ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : REED MAWHINNEY & LINK, PLLC
Account Number : I20180000105
Phone : (863)687-1771
Fax Number : (863)687-1775

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Suzanne@polk.lawyer.com

**FLORIDA LIMITED LIABILITY CO.
EHC Ayala, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

RECEIVED
2021 MAR -9 PM 4:10
DIVISION OF CORPORATIONS
COMMERCIAL
SERVICES

JLK 3/10/21

H 21000095656 3

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: EHC Ayala, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suzanne M. Middleton
Name of Person
Reed Mawhinney & Link, PLLC
Firm/Company
1611 Harden Blvd.
Address
Lakeland, FL 33803
City/State and Zip Code
suzanne@polklawyer.com
E-mail address: (to be used for future annual report notification)

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

2021 MAR -9 PM 4:35

For further information concerning this matter, please call:

Suzanne M. Middleton 863 687-1771
Name of Person at Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

H 21000095656 3

H 2 100009 5656 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EHC Ayala, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1710 Newport Avenue
Lakeland, FL 33803

1710 Newport Avenue
Lakeland, FL 33803

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Reed Mawhinney & Link, PLLC

Name

1611 Harden Blvd.

Florida street address (P.O. Box NOT acceptable)

Lakeland

FL

33803

City

State

Zip

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 as provided for in Chapter 605, F.S.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2021 MAR -9 PM 4:30
MICHIGAN STATE UNIVERSITY

H 2 100009 5656 3

H210000956563

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Elizabeth Nichols
1710 Newport Avenue
Lakeland, FL 33803

2021 MAR -9 PM 4:33

(Use attachment if necessary)


ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
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 Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Elizabeth Nichols

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

H210000956563