

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

**L21000207772
FILED 8:00 AM
May 04, 2021
Sec. Of State
jafason**

Article I

The name of the Limited Liability Company is:
CENTER FOR VASCULAR MEDICINE FL, PLLC

Article II

The street address of the principal office of the Limited Liability Company is:
7474 GREENWAY CENTER DRIVE
SUITE 900
GREENBELT, MD. US 20770

The mailing address of the Limited Liability Company is:
7474 GREENWAY CENTER DRIVE
SUITE 900
GREENBELT, MD. US 20770

Article III

Other provisions, if any:
VASCULAR MEDICINE

Article IV

The name and Florida street address of the registered agent is:
PARACORP INCORPORATED
155 OFFICE PLAZA DRIVE
1ST 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.

Registered Agent Signature: JODY MOUA, ASST. SECRETARY

Article V

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

Title: MBR
SANJIV LAKHANPAL
7474 GREENWAY CENTER DRIVE, SUITE 900
GREENBELT, MD. 20770 US

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Signature of member or an authorized representative

Electronic Signature: DR. SANJIV LAKHANPAL

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.