

Division of Corporations

L21000346431

Florida Department of State
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.

(((H21000290523 3)))



H210002905233ABCY

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 : DUANE MORRIS LLP
Account Number : I19990000059
Phone : (305) 960-2217
Fax Number : (305) 397-2683

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

Email Address: JMigliori@Duanemorris.com

FLORIDA LIMITED LIABILITY CO.
Andover Medtek LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

2021 JUN 30 PM 4:58

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

H21000290523 3

**ARTICLES OF ORGANIZATION
OF
ANDOVER MEDTEK LLC
(a Florida limited liability company)**

The undersigned, in forming a Florida limited liability company under the Florida Revised Limited Liability Company Act, Chapter 605 of the Florida Statutes, hereby makes, acknowledges, adopts and files the following Articles of Organization (the "Articles").

ARTICLE I. NAME

The name of the limited liability company is **ANDOVER MEDTEK LLC** (the "Company").

ARTICLE II. MAILING AND PRINCIPAL ADDRESS

The mailing address and street address of the principal office of the Company is **512 Swan Range Road, Orange City, Florida 32763**.

ARTICLE III. REGISTERED AGENT AND OFFICE

The name of the initial Registered Agent and the street address of the registered office of the Company in the State of Florida is **CORPORATION SERVICE COMPANY, 1201 Hays Street, Tallahassee, Florida 32301**.

ARTICLE IV. MANAGEMENT

The Company shall be a manager managed limited liability company and shall be managed in accordance with the Operating Agreement adopted by the members for the management of business and affairs of the Company. The initial Manager of the Company shall be **Gustavo Sumar Saxonis, Salar Ascotán N°1305, Parque de Negocios Enea, Pudahuel, CP 902 1737**.

ARTICLE V. AUTHORIZED REPRESENTATIVE

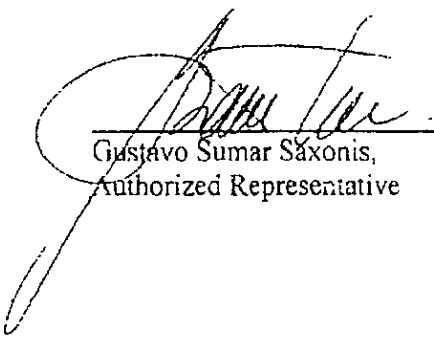
The names and addresses of the authorized representatives of the organizing member of the Company executing these Articles of Organization are:

Name and Address	Title
Gustavo Sumar Saxonis, Salar Ascotán N°1305 Parque de Negocios Enea, Pudahuel CP 902 1737	Authorized Representative

H21000290523 3

H21000290523 3

IN WITNESS WHEREOF, the undersigned Authorized Representative has executed these Articles of Organization as of this 29 day of July, 2021.



Gustavo Sumar Saxonis,
Authorized Representative

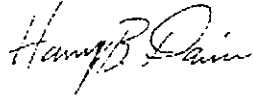
H21000290523 3

H21000290523 3

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the Company **ANDOVER MEDTEK LLC** at the place designated as the Registered Office under Article III of the Articles of Organization, **CORPORATION SERVICE COMPANY** hereby accepts the appointment as Registered Agent, agrees to act in this capacity, and further agrees to comply with the provisions of all Statutes relating to the proper and complete performance of its duties. **CORPORATION SERVICE COMPANY** is familiar with and accepts the obligations of its position as Registered Agent as provided for in Chapter 605, F.S.

CORPORATION SERVICE COMPANY

By: 
Name: Harry B Davis
Its: Asst VP
7/30
Date: , 2021

H21000290523 3