

L21000391875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

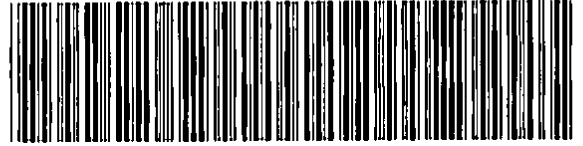
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100371424931

03/02/21--01001--017 **125.00



2021 SEP -2 PM 2:01

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FL

2021 SEP -2 AM 10:04

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Phelan Family Support Center, LLC

Signature _____

Requested by: SETH

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

FILED

2021 SEP -2 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION
OF
PHELAN FAMILY SUPPORT CENTER, LLC,
a Florida Limited Liability Company**

The undersigned, being the duly authorized representative of the initial members of a limited liability company to be organized under the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, adopts and submits the following Articles of Organization for such limited liability company:

**ARTICLE I
NAME**

The name of the limited liability company is **PHELAN FAMILY SUPPORT CENTER, LLC**, a Florida limited liability company (the "Company").

**ARTICLE II
PRINCIPAL PLACE OF BUSINESS**

The street address of the principal office of the Company shall be **3820 Via Del Rey, Bonita Springs, FL 34134**. The mailing address of the principal office of the Company shall be **3820 Via Del Rey, Bonita Springs, FL 34134**.

**ARTICLE III
REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the registered agent of the Company is 1410 N. Westshore Blvd, Suite 800, Tampa, Florida 33607, and the name of the registered agent at such address is **Old Republic Exchange Company c/o Janet Schaum**.

**ARTICLE IV
ADMISSION OF MEMBERS**

The members of the Company may admit new members to the Company as more fully described in and subject to the terms, conditions and requirements set forth in the Company's Operating Agreement and Regulations. Newly admitted members shall have all of the rights and privileges as set forth in the Company's Operating Agreement and Regulations.

**ARTICLE V
EFFECTIVE DATE**

The Company's effective date of existence shall begin on the date of filing of these Articles.

ARTICLE VI DURATION

The Company's duration shall be perpetual. Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or any other event that would terminate the continued membership of a member in the Company, the remaining members shall have the right to continue the business of the Company as provided in the Operating Agreement and Regulations.

ARTICLE VII ADOPTION OF OPERATING AGREEMENT AND REGULATIONS

The initial Operating Agreement and Regulations of the Company shall be adopted by its initial members. The Operating Agreement and Regulations may contain any provision for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization.

ARTICLE VIII AUTHORIZED MEMBER

The Company will be member-managed, as more fully described in the Operating Agreement and Regulations. The Authorized Member of the Company shall be as follows:

AMBR: Old Republic Exchange Company, a California corporation
500 Ygnacio Valley Road, Suite 290
Walnut Creek, CA 94596

IN WITNESS WHEREOF, the undersigned, being the duly authorized representative of the Company, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, has executed these Articles of Organization as of this 1st day of September 2021.

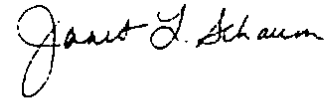


By: _____
Print Name: Tina M. LePoer
Title: Vice President/Authorized Representative

ACCEPTANCE BY REGISTERED AGENT

I, Janet Schaum, on behalf of Old Republic Exchange Company, having been duly designated to act as registered agent and to accept service of process for **PHELAN FAMILY SUPPORT CENTER, LLC**, a limited liability company to be organized under the Florida Revised Limited Liability Company Act, 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 am familiar with and accept the designations of my position as Registered Agent.

OLD REPUBLIC EXCHANGE COMPANY



Print Name: Janet Schaum

FILED
2021 SEP -2 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FL

PHELAN FAMILY SUPPORT CENTER, LLC

ARTICLES OF ORGANIZATION

PAGE 3 OF 3