

L21000529590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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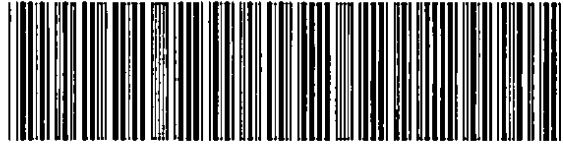
(Business Entity Name)

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TALLAHASSEE, FL
2021 DEC 21 PM 2:13
TALLAHASSEE, FL



Department of State

Division of Corporations

Date: 12/21/2021

American Expediting (Stealth Courier)

1531 Commonwealth Business Dr.

Ste 105

Tallahassee, Fl. 32303

850-294-5632

Stealth Courier Box

Company: Scanmed QOF LLC

Requester: Meridian Partners

Order: 13641693

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: SCANMED QOF 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:

AZUREDE ROSS

Name of Person

MERIDIAN PARTNERS LAW P.A.

Firm/Company

4923 W. CYPRESS STREET

Address

TAMPA, FL 33607

City/State and Zip Code

AZUREDE@MERIDIANPARTNERSLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AZUREDE ROSS

813

443-5260

at ()

Name of Person

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

ARTICLES OF ORGANIZATION
for
Florida Limited Liability Company

ARTICLE I

The name of the limited liability company is: **SCANMED QOF LLC** (the "Company").

ARTICLE II

The street address of the principal office of the Company is:

2901 West Busch Boulevard
Suite 901
Tampa, Florida 33618

The mailing address of the Company is:

2901 West Busch Boulevard
Suite 901
Tampa, Florida, 33618

ARTICLE III

The name and Florida street address of the registered agent for the Company is:

Bryan W. Sykes, Esq.
4923 West Cypress Street
Tampa, Florida 33607

SECRETARY OF STATE
TALLAHASSEE, FL

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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 agreed to act in this capacity. I further agree to comply with the provisions of all statutes relating to the property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: _____

ARTICLE IV

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

Title: Manager
Name: Scanview, LLC
Address: 2901 West Busch Boulevard
 Suite 901
 Tampa, Florida 33618

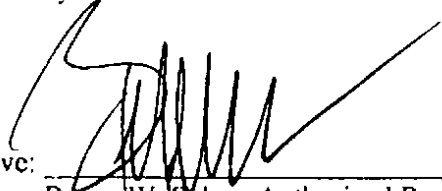
ARTICLE V

The Effective Date (if other than the date of filing) shall be December 21, 2021.

ARTICLE VI

The Company has been formed to: (a) qualify as a *qualified opportunity fund* within the meaning of Section 1400Z-2 of the Internal Revenue Code of 1986, as amended (the "Code"); (b) invest in qualified opportunity zone property within the meaning of the Code, and in furtherance of that purpose, to carry on any lawful business for which limited liability companies may be formed under the *Florida Revised Limited Liability Company Act*.

Signature of member or authorized representative: _____


Bryan W. Sykes, Authorized Representative

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 §817.155, Florida Statutes. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the limited liability company and every year thereafter to maintain "active" status.

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