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Division of Corporations

Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
 BRIGHT START PT PLLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



February 13, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

INTERSTATE FILINGS LLC

SUBJECT: BRIGHT START PT PLLC
REF: W22000017213

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The specific purpose of the entity must be set forth in the document.

If you have any further questions concerning your document, please call (850) 245-6052.

Matthew T Moon

FAX Aud. #: H22000055914

Regulatory Specialist II Supervisor
New Filing Section

Letter Number: 722A00003545

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BRIGHT START PT PLLC

(Must end with 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:

9900 W SAMPLE ROAD, SUITE 405-3
CORAL SPRINGS, FL 33065

9900 W SAMPLE ROAD, SUITE 405-3
CORAL SPRINGS, FL 33065

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:

BORIS DOLUB

Name

9900 W SAMPLE ROAD, SUITE 405-3

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

CORAL SPRINGS FL 33065

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.

BORIS DOLUB

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager
MGRM

Name and Address:

BORIS DOLUB
9900 W.SAMPLE ROAD, SUITE 405-3
CORAL SPRINGS, FL 33065

MGRM

EUGENE PREYS
9900 W.SAMPLE ROAD, SUITE 405-3
CORAL SPRINGS, FL 33065

MGRM

YURY BENIN
9900 W.SAMPLE ROAD, SUITE 405-3
CORAL SPRINGS, FL 33065

(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.

ARTICLE VI SPECIFIC PURPOSE OF BUSINESS - PHYSICAL THERAPY

REQUIRED SIGNATURE:

BORIS DOLUB

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.

BORIS DOLUB

Typed or printed name of signee

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