L22000109911

(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



800379993748

2022 MAR 17 PH 4: 21





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	03/16/2022	
Name:		_
	e #:1623138	
Entity Nar	me: REACH NEU	ROLOGY ACO, LLC
	icles of Incorporation/Authorization	
☐ Am	nendment	
☐ Ch	ange of Agent	
Re	instatement	
Co	nversion	
☐ Me	rger	
☐ Dis	solution/Withdrawal	
☐ Fic	titious Name	
✓ Oth	nerCERTIFI	ED COPY UPON FILING
Authorize Signature	d Amount. \$155.00	

F: +852.2682.9790

ARTICLES OF ORGANIZATION

HED

REACH NEUROLOGY ACO, LLC 2022 MAR 17 PM 4: 21

ARTICLE I: - Name

E TARY OF STATE TALLAHASSEE, FL

The name of the Limited Liability Company is:

REACH Neurology ACO, LLC

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

> 2150 Coral Way 8th Floor Miami, Florida 33145

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

> Cogency Global Inc. 115 North Calhoun Street Suite 4 Tallahassee, Florida 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 as provided for in Chapter 605, F.S.

> Cogency Global Inc., Registered Agent By: /s/ Eric Hood_____ Name: Eric Hood_____ Title: Assistant Secretary _____

ARTICLE IV: - Management

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

Name and Address <u>Title</u>

Neuro Network Holdings, LLC MGR.

2150 Coral Way, 8th Floor Miami, Florida 33145

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on March 15, 2022

/s/ Sergey N. Kotelnikov Sergey N. Kotelnikov, Authorized Representative of a Member

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155, Florida Statutes.)

Sergey N. Kotelnikov
Typed or printed name of signee

2022 HAR 17 PH 4: 21