

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L22000309971
FILED 8:00 AM
July 12, 2022
Sec. Of State
jsdennis

Article I

The name of the Limited Liability Company is:

NZL ANESTHESIA CARE, PLLC

Article II

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

15561 WATERLEIGH COVE DRIVE
WINTER GARDEN, FL. US 34787

The mailing address of the Limited Liability Company is:

15561 WATERLEIGH COVE DRIVE
WINTER GARDEN, FL. US 34787

Article III

Other provisions, if any:

THE SOLE PURPOSE OF THIS COMPANY IS TO PROVIDE SERVICES BY
NORAZLINA MILNE AS A CERTIFIED REGISTERED NURSE
ANESTHETIST.

Article IV

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

NORAZLINA MILNE
15561 WATERLEIGH COVE DRIVE
WINTER GARDEN, FL. 34787

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.

Registered Agent Signature: NORAZLINA MILNE

Article V

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

Title: MGRM
NORAZLINA MILNE
15561 WATERLEIGH COVE DRIVE
WINTER GARDEN, FL. 34787 US

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Signature of member or an authorized representative

Electronic Signature: NORAZLINA MILNE

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 s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.