

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220003515513)))



H220003515513ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Fax:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SMITH HULSEY & BUSEY

Account Number : 075030000653 Phone : (904)359-7700 Fax Number : (904)359-7708

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: CESSALEE1@GMAIL.COM

## FLORIDA LIMITED LIABILITY CO.

Cessalee A. Swars, APRN, PLLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu — Corporate Filing Menu

Help



(((H22000351551 3)))

Fax:

# ARTICLES OF ORGANIZATION OF CESSALEE A. SWARS, APRN, PLLC

The undersigned organizer, who is the authorized representative of Cessalee A. Swars, APRN, PLLC (the "Company") under the Florida Professional Service Corporation and Limited Liability Company Act, hereby adopts the following Articles of Organization.

#### **ARTICLE 1 - NAME**

The name of the Company is Cessalee A. Swars, APRN, PLLC

#### ARTICLE II - PRINCIPAL OFFICE

The street address and the mailing address of the principal office of the Company are both 96150 Piney Island Drive, Fernandina Beach, Florida 32034.

#### **ARTICLE III - NATURE OF BUSINESS**

The purpose for which the Company is organized is to provide professional medical and healthcare services.

### ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS

The name and street address of the initial registered agent are Cessalee A. Swars and 96150 Piney Island Drive, Fernandina Beach, Florida 32034.

#### ARTICLE IV - MANAGEMENT

The Company shall be a manager-managed company. The name of the initial manager is Cessalee A. Swars.

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization on the 13 day of October 2022.

(01173871-1)

(((H22000351551 3)))

Fax.

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605,0113, FLORIDA STATUTES, CESSALEE A. SWARS, APRN, PLLC A FLORIDA PROFESSIONAL LIMITED LIABILITY COMPANY, SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- The name of the Professional Limited Liability Company is Cessalee A. Swars, APRN, PLLC.
- The name and the Florida street address of the registered agent and office are Cessalee A. Swars and 96150 Piney Island Drive, Fernandina Beach, Florida 32034.

Having been named as registered agent and to accept service of process for the above stated professional limited liability company at the place designated in this certificate, Cessalee A. Swars hereby accepts the appointment as registered agent and agrees to act in this capacity. Cessalee A. Swars further agrees to comply with the provisions of all statutes relating to the proper and complete performance of her duties, and is familiar with and accepts the obligations of her position as registered agent as provided for in Chapter 605, F.S.

Cessalee A. Swars

Date: October 13, 2022

[01173871-1]