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Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

Email Address: delaraygarcia@orlandofamilymedical.com

**FLORIDA LIMITED LIABILITY CO.  
LAKE WALES HOLDING GROVE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

LAKE WALES HOLDING GROVE, LLC

**ARTICLE II - Address**

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

931 W Oak Street  
Suite 103  
Kissimmee, FL 34741

The mailing address of the Limited Liability Company is:

931 W Oak Street  
Suite 103  
Kissimmee, FL 34741

**ARTICLE III - Registered Agent and Office and Registered Agent's Signature**

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

Delaray Garcia  
10600 Lago Bella Dr.  
Orlando, FL 32832

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, Florida Statutes.

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By: Delaray Garcia  
(Registered Agent's Signature)  
Delaray Garcia

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