3000062720

Florida Department of State

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.

(((H23000003813 3)))



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

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ACCOUNT ON US INC.

Account Number : I20040000130

Phone : (407)892-1266 Fax Number : (407)892-4996

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

Email Address: OFFI(E@) ACCOUNTONUS. DRG

FLORIDA LIMITED LIABILITY CO. BLESSED DRAW MOBILE PHLEBOTOMY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

H23000003813 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF

BLESSED DRAW MOBILE PHLEBOTOMY LLC

ARTICLE I. NAME

The name of this Limited liability Company is: BLESSED DRAW MOBILE PHLEBOTOMY LLC

ARTICLE II. NATURE OF BUSINESS AND POWERS

The general nature of the business to be transacted by this Organization is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE III. TERMS

This Organization shell exists perpetually.

ARTICLE IV. REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Registered Agent and the street address of the initial Registered Office of this Organization in the State of Florida shall be:

BERNARD R. SUTTER 1207 ILLINOIS AVE. ST CLOUD FL 34769

The Organization's principal address and mailing address is 1514 DELAWARE AVENUE SAINT CLOUD, FLORIDA 34769. The Managing Members from time to time niay move the Registered Office to any other address in the State of Florida

H230000038133

ARTICLE V. AMENDMENT

These Articles of this Organization may be amended in the manner provided by law.

ARTICLE VI. MANAGER(S) OR MANAGING MEMBER(S)

The name and address or each is as follows:

MANAGING MEMBER MADELINE L. GARICA 1514 DELAWARE AVENUE SAINT CLOUD, FLORIDA 34769

I BERNARD SUTTER, the undersigned, as an authorized representative of a member, has executed the forgoing Articles of Organization on January 4, 2023

H23000003813 3

ACCEPTANCE

I. BERNARD R. SUTTER, hereby accept the designation as Registered Agent for Service of Process upon **BLESSED DRAW MOBILE PHLEBOTOMY LLC.**, desiring to organize under the laws of the State of Florida, with its registered office at 1207 ILLINOIS AVE ST CLOUD, FL 34769 and agree to act as Registered Agent for said Organization and to comply with the provisions of Florida Law pertaining to keeping open said office and upon whom process may be served.

BERNARD R. SUTTER

articles BLESSED DRAW MOBILE PHLEBOTOMY LLC