

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

L23000118802
FILED 8:00 AM
March 07, 2023
Sec. Of State
jafason

Article I

The name of the Limited Liability Company is:

ACUTE CARE PROVIDERS, PLLC

Article II

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

4801 SE 11TH AVE.
OCALA, FL. US 34480

The mailing address of the Limited Liability Company is:

4801 SE 11TH AVE.
OCALA, FL. US 34480

Article III

Other provisions, if any:

STATEMENT OF PURPOSE FOR PROFESSIONAL DESIGNATION: MEDICAL
SERVICES

Article IV

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

LINDA STRUVE-DOERFLEIN
4801 SE 11TH AVE.
OCALA, FL. 34480

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: LINDA STRUVE-DOERFLEIN

Article V

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

Title: AMBR
LINDA STRUVE-DOERFLEIN
4801 SE 11TH AVE
OCALA, FL. 34480 US

Title: AMBR
KETHEESWARAN KATHIRIPILLAI M.D.
4801 SE 11TH AVE
OCALA, FL. 34480 US

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Signature of member or an authorized representative

Electronic Signature: LINDA STRUVE-DOERFLEIN

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.