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REGISTRATION  
UNITED STATES  
CORPORATIONS

2023 JUN -2 AM 3:02  
ALL INFORMATION  
HEREIN IS UNCLASSIFIED  
DATE 07/27/23 BY 60322/UC/STP

FLORIDA LIMITED LIABILITY CO.  
AG OCCUPATIONAL THERAPY, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
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ARTICLES OF ORGANIZATION  
OF  
AG OCCUPATIONAL THERAPY, LLC

The undersigned Authorized Representative of the Member hereby executes these Articles of Organization for the purpose of forming a limited liability company (the "Limited Liability Company") in accordance with the laws of the State of Florida.

ARTICLE I.  
NAME

The name of the Limited Liability Company shall be AG Occupational Therapy, LLC.

ARTICLE II.  
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, effective as of the date of filing these Articles of Organization with the Florida Department of State.

ARTICLE III.  
MAILING ADDRESS; PRINCIPAL OFFICE

The address of the principal office and the mailing address of the Limited Liability Company shall be 1000 Legion Place, Suite 1250, Orlando, Florida 32801, and such other places as may be designated by the Manager from time to time.

ARTICLE IV.  
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 9401 Harrell Avenue #3, Treasure Island, Florida 33706, and the name of the registered agent is Amanda N. Garcia.

ARTICLE V.  
PURPOSE

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.


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**ARTICLE VI  
MANAGEMENT**

The Limited Liability Company shall be a manager-managed limited liability company. The authority, and limitations on such authority, of the Manager shall be specified in the Operating Agreement of the Limited Liability Company. The initial Manager of the Limited Liability Company, and the address of said Manager, shall be Amanda N. Garcia whose mailing address is 9401 Harrell Avenue #3, Treasure Island, Florida 33706.

The undersigned, being the Authorized Representative of the Member, hereby certifies that the foregoing constitutes the Articles of Organization of AG Occupational Therapy, LLC.

EXECUTED by the undersigned on May 30, 2023.


  
Amanda Garcia (May 30, 2023 20:40 EDT)

\_\_\_\_\_  
Amanda N. Garcia,  
Authorized Representative of the Member

**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT**  
**ACKNOWLEDGMENT OF REGISTERED AGENT**

Pursuant to Section 605.0113 of the Florida Statutes, I agree to act in the capacity of registered agent for AG Occupational Therapy, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 605.0113 of the Florida Statutes.

DATED this 30 day of May, 2023.

  
Amanda Garcia (May 30, 2023 20:40 EDT)

\_\_\_\_\_  
Amanda N. Garcia

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