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FLORIDA LIMITED LIABILITY CO.
LCP Expert MD, LLC

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**ARTICLES OF ORGANIZATION
OF
LCP Expert MD, LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, does hereby form a limited liability company under the laws of the State of Florida.

ARTICLE I

NAME

The name of the limited liability company shall be **LCP Expert MD, LLC**

ARTICLE II

ADDRESS AND PLACE OF BUSINESS

The mailing address and principal place of business for the limited liability company is: 300 State Street East, Suite 222, Oldsmar, FL 34677.

ARTICLE III

PERIOD OF DURATION

The limited liability company shall begin existence on the day of filing, and shall continue into perpetuity, or until dissolved in a manner provided by law or by regulations adopted by the Members of the limited liability company.

ARTICLE IV

PURPOSES

The limited liability company may engage in the transaction of any or all lawful business for which limited liability companies may be formed under the laws of the State of Florida.

ARTICLE V

REGISTERED OFFICE AND REGISTERED AGENT

The street address of the limited liability company's initial registered office is: 300 State Street East, Suite 222, Oldsmar, FL 34677.

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The initial registered agent at such address is **Colleen Maxcy, M.D.** The limited liability company may change its registered office or its registered agent or both by filing with the Department of State of the State of Florida a statement complying with Section 605.0114, Florida Statutes.

ARTICLE VI

MANAGEMENT

The management of the limited liability company, unless otherwise provided in the articles of organization or the operating agreement, shall be vested in a Manager.

The name and address of the Manager is as follows:

Colleen Maxcy, M.D.
300 State Street East, Suite 222
Oldsmar, FL 34677

ARTICLE VII

CONTINUITY OF BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or upon the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the business of the limited liability company shall not cease and the limited liability company shall not be dissolved unless the business of the limited liability company is terminated by the consent or agreement of all remaining members.

ARTICLE VIII

OPERATING AGREEMENT

The members of the limited liability company shall adopt an operating agreement which shall act as the operating agreement of the members pertaining to the regulation, management and affairs of the limited liability company, provided that such operating agreement shall not be inconsistent with these Articles of Organization, or with the laws of the State of Florida. The operating agreement shall be repealed or altered only by the members of the limited liability company, in the manner now or hereafter prescribed by the laws of the State of Florida.

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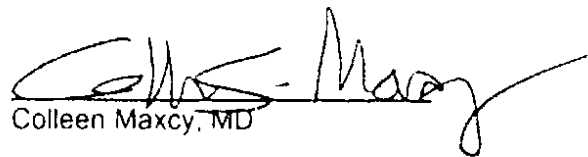
ARTICLE IX

ACKNOWLEDGMENT

The undersigned subscriber does hereby certify that the foregoing constitutes the proposed Articles of Organization of **LCP Expert MD, LLC**.

These Articles of Organization shall be effective and governed by the Florida Limited Liability Company Statute, Chapter 605.

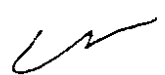
IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 11 day of July, 2023.


Colleen Maxcy, MD

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes.
I am aware that any 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.

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CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

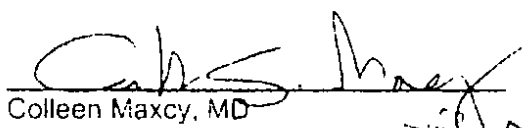
PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **LCP Expert MD, LLC.**
2. The name and address of the registered agent and office is:

**Colleen Maxcy, MD
300 State Street East, Suite 222
Oldsmar, FL 34677**

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, F.S.

Dated this 11 day of July, 2023.


Colleen Maxcy, MD
Registered Agent

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