# Division of Corporations Electronic Filing Cover Sheet

Florida Department of State

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.

(((H23000292130 3)))



H230002921303ABCW

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 : CARVER DARDEN Account Number : I20070000116 Phone : (850)266-2300

Fax Number : (850)266-2301

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

Email Address: bryan.krause@nursespring.com

UZ3AUS 23 AM 10: 478

# FLORIDA LIMITED LIABILITY CO.

## NurseSpring of Sarasota, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H23000292130 3)))

#### ARTICLES OF ORGANIZATION

OF

### NURSESPRING OF SARASOTA, LLC

SECRETARY OF SIGNARY O

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

#### ARTICLE I - Name:

The name of the limited liability company (horelnafter referred to as the "Company") is "NurseSpring of Sarasota, LLC".

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Company is 5500 North Dayls Highway, Pensacola, FL 32503.

#### ARTICLE III - Duration:

The period of duration for the Company is perpetual.

## ARTICLE IV - Management:

The Company is to be a manager-managed company and is to be managed by one or more managers.

## ARTICLE V - Registered Agont and Office:

The name and street address of the Initial registered agent of the Company in the State of Florida, who Consent to Appointment as Registered Agent accompanies these Articles of Organization, is Matthew C. Hoffman, whose address is 151 W. Main Street, Suite 200, Pensecola, FL 32502.

IN WITNESS WHEREOF, I have signed these Articles of Organization of NurseSpring of Sarasota, LLC and acknowledged them to be my act this 22 day of August, 2023.

Bryan Krause, Manager and Organizer

Page 1 of 2 Articles of Organization (((H23000292130 3)))

# CERTIFICATE OF DESIGNATION AND CONSENT TO APPOINTMENT AS REGISTERED AGENT

Having been named Registered Agent and designation to accept service of process for NurseSpring of Sarasota, LLC, at the place designated herein, and being familiar with the obligations of such position, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

DATED this 22 day of August, 2023.

Marthey C. Hoffman

2023 AUC 23 AM 8: 39

SECRETARY OF STAN

Page 2 of 2 Articles of Organization