

L23000432499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

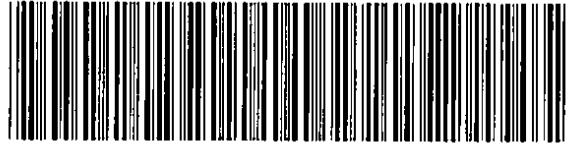
(Business Entity Name)

(Document Number)

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S. CHATHAM  
SEP 14 2023

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2023 SEP 13 PM 3:39

212

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**CORPORATE  
ACCESS,  
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

**WALK IN**

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**CERTIFIED COPY**

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**LLC**

1. **LACEY MCMILLAN MD PLLC**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 15, 2023

CORPORATE ACCESS, INC.

SUBJECT: LACEY MCMILLAN MD PLLC  
Ref. Number: W23000126265

*Corrected*

We have received your document for and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham  
Regulatory Specialist III  
Director's Office

Letter Number: 523A00021269

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2023 SEP 18 PM 3:55  
ALLAHASSEE, FL 32009

Articles of Organization  
For  
Lacey McMillan MD PLLC  
Florida Limited Liability Company

**ARTICLE I - Name:**

The name of the Limited Liability Company is Lacey McMillan MD PLLC

**ARTICLE II - Address:**

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

27617 Tierra Del Sol Ln  
Bonita Springs, FL 34135

**ARTICLE III – Business Purpose:**

The purpose of this PLLC is independent contractor physician.

**ARTICLE IV – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Legalinc Corporate Services Inc.

476 Riverside Ave.

Jacksonville, FL 32202

2023 SEP 18 PM 3:38

*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.*

Dana Case  
Dana Case, Manager

**ARTICLE V - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Lacey McMillan  
27617 Tierra Del Sol Ln  
Bonita Springs, FL 34135

LGM

Lacey McMillan, Organizer