

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

**L24000300843
FILED 8:00 AM
July 05, 2024
Sec. Of State
kcostello**

Article I

The name of the Limited Liability Company is:
SPACECOAST WOUND SPECIALIST LLC

Article II

The street address of the principal office of the Limited Liability Company is:
770 SCHUSTER ROAD SW
PALM BAY, FL. 32908

The mailing address of the Limited Liability Company is:
770 SCHUSTER ROAD SW
PALM BAY, FL. 32908

Article III

Other provisions, if any:
ADVANCE PRACTICE NURSES PROVIDING WOUND CARE TO PATIENTS IN
THE COMMUNITY.

Article IV

The name and Florida street address of the registered agent is:
FREDERICA R FISHER
122 OAKCREST AVE NE
PALM BAY, FL. 32907

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: FREDERICA RENEE FISHER

Article V

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

Title: MGR
FREDERICA R FISHER
122 OAKCREST AVE NE
PALM BAY, FL. 32907

Title: MGR
MARIANNE L ARRUDA-WENNBERG
770 SCHUSTER ROAD SW
PALM BAY, FL. 32908

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Signature of member or an authorized representative

Electronic Signature: FREDERICA RENEE FISHER

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.