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Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone : (407)841-1200 Fax Number : (407)423-1831

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

Email Address: FPANNUALREPORT@DEANMEAD.COM

FLORIDA LIMITED LIABILITY CO. CENTER FOR HEALTHY AGING, REHABILITATION, AND TRAINI

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ARTICLES OF ORGANIZATION

OF

CENTER FOR HEALTHY AGING, REHABILITATION, AND TRAINING, LLC

The undersigned, acting as authorized representative of this limited liability company pursuant to Chapter 605 of the Florida Statutes, hereby forms a limited liability company under the laws of the State of Florida and adopts the following Articles of Organization for such limited liability company:

<u>ARTICLE I - NAME OF COMPANY</u>

The name of the limited liability company is CENTER FOR HEALTHY ACING, REHABILITATION. AND TRAINING, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The street address, and the mailing address, of the principal office of the Company is 5320 West Harbor Village Drive, Unit 201, Vero Beach, FL 32967.

ARTICLE III - REGISTERED AGENT AND REGISTERED OFFICE

The street address of the initial registered office of the Company in the State of Florida is 420 S. Orange Avenue, Suite 700, Orlando, Florida 32801. The name of the registered agent of the Company at that address DEAN MEAD SERVICES, LLC.

ARTICLE IV - MANAGEMENT

The Company is to be a manager-managed company. The name and address of the initial miggette files side

manager of the Company is:

MARY A. FINN 5320 West Harbor Village Drive, Unit 201 Vero Beach, FL 32967

<u>ARTICLE V - EFFECTIVE DATE</u>

The effective date of these Articles of Organization, and the beginning of the existence of the Company, shall be the date of filing of these Articles of Organization with the Florida Department of State.

The undersigned auth	orized representative of a me	mber has made and s	ubscribed these
Articles of Organization on _	9/27/2024	<u>_</u> ·	

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.

Signed by:

Mary 1. Finn

DESERTIZENCY

DESE

Mary A. Finn, authorized member-representative

STATEMENT OF ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent to accept service of process for the above-referenced limited liability company, at the place designated in the foregoing Articles of Organization, the undersigned hereby accepts such appointment and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent, and is familiar with, and accepts the duties and obligations of. Section 605.0113 of the Florida Statutes.

DEAN MEAD SERVICES, LLC

By: Dean, Mead, Egerton, Bloodworth, Capouano & Bozarth, P.A., sole Member

By: John E. Moore, III

John E. Moore III, Vice President

Date: _____