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**FLORIDA LIMITED LIABILITY CO.  
ENPOWER HEALTH CLINICAL CONNECT, LLC**

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Help

((H24000356407 3)))

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ARTICLES OF ORGANIZATION

OF

ENPOWER HEALTH CLINICAL CONNECT, LLC

A Florida Limited Liability Company

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ARTICLE I

NAME

The name of this limited liability company is "*eNPower Health Clinical Connect, LLC*" (the "Company").

ARTICLE II

MAILING AND STREET ADDRESS

The mailing address of the principal office of the Company is as follows:

PO Box 2644  
Windermere, FL 34786

The street address of the principal office of the Company is as follows:

315 E. Robinson Street, Suite 600  
Orlando, FL 32801

ARTICLE III

COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 605.0207, Florida Statutes, the Company's existence shall commence at the time and date on which these Articles of Organization are filed with the Florida Department of State.

ARTICLE IV

MANAGEMENT

The Company shall be managed by one or more managers and is therefore a manager-managed company. The name and mailing address of the sole manager of the Company is as follows:

eNPower Health, LLC  
PO Box 2644  
Windermere, FL 34786

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## ARTICLE V REGISTERED AGENT

The address of the initial Registered Office and the Registered Agent of the Company at such address are as follows:

ZKS Registered Agent Services, LLC  
315 E. Robinson Street, Suite 600  
Orlando, FL 32801

the R.A.

## ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 605, Florida Statutes, and shall be governed by the laws of the State of Florida.



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Erin Gray Burke  
Authorized Representative

## ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned submits the following statement of acceptance of her designation as Registered Agent for the Company:

*Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 of the Florida Statutes.*



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Erin Gray Burke Esq. on behalf of  
ZKS Registered Agent Services, LLC  
Registered Agent

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