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From:

Account Name : GREENSPOON MARDER, P.A.  
Account Number : 076064003722  
Phone : (888)491-1120  
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**FLORIDA LIMITED LIABILITY CO.**

**Dunnellon Medical Building, LLC**

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**ARTICLES OF ORGANIZATION  
OF  
DUNNELLON MEDICAL BUILDING, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is Dunnellon Medical Building, LLC

**ARTICLE II - Duration:**

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

**ARTICLE III - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is 9259 Point Cypress Drive, Orlando, Florida 32836.

**ARTICLE IV - Registered Agent:**

The name and address of the initial registered agent for this Limited Liability Company is Michael Marder, c/o Greenspoon Marder LLP, 201 E. Pine Street, Suite 500, Orlando, Florida 32801.

**ARTICLE V - Management:**

The Limited Liability Company is to be managed by a manager or managers and the name and address of the initial manager who is to serve as manager is:

James L. Gissy  
9259 Point Cypress Drive  
Orlando, FL 32836

The manager of this Limited Liability Company: (i) may be replaced by the members, and (ii) shall be elected by the members, as provided for in the Operating Agreement of this Limited Liability Company.

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JANUARY 16 2025  
TALLAHASSEE, FLORIDA

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Whereof, the undersigned member has executed these Articles the 16<sup>th</sup> day of January, 2025.

/s/Kate Saft

Kate Saft, Esq.,

Authorized Representative of Member

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Dunnellon Medical Building, LLC

2. The name and address of the registered agent and office is:

Michael Marder  
c/o Greenspoon Marder LLP  
201 E. Pine Street, Suite 500  
Orlando, FL 32801

*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.*

/s/Michael Marder

Michael Marder

(Signature)

January 16, 2025

(Date)

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