

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations : (850)922-4003

Fax Number

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: BUSINESS FILINGS Account Name Account Number: 105256001620

(608) 827-5300 : (608)827-5501 Phone Fax Number

## LIMITED LIABILITY COMPANY

Glacier Medical LLC

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## Glacier Medical LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Glacier Medical LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 13014 N. Dale Mabry Ste. 319, tampa, Florida 33618. Located in County of hillsborough.

H99000032205 9 ARTICLES OF ORGANIZATION

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRE

The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and address of the initial registered agent is: Business Filings Incorporated The name and East Broward Blvd., Suite 700, Ft. Lauderdale, FL 33301. Located in the County of Broward.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2039

ARTICLE V

**MANAGERS** 

The management of the limited liability company is reserved for the managers and the name and address of the managerof the Limited Liability Company is: Richard R. Powell, 13014 N. Dale Mabry Ste. 319, Tampa, FL 33618

2 authorized regresentative Prepared by Richard Oster, Business Filings, 8025 Excelsior Dr. Suite 200, Madison, WI 53717. (608) 827-5300.

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Glacier Medical LLC

The name and address of the registered agent and office is: Business Filings Incorporated., 1 East Broward Blvd., Suite 770, Fort Lauderdale, FL 33301

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Signature: Richard Oster. Vice President

Business Filings Incorporated