

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

L19000025786  
FILED 8:00 AM  
January 24, 2019  
Sec. Of State  
jafason

**Article I**

The name of the Limited Liability Company is:  
ALLIED CARE MED SERVICES LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
115 BRENT CIRCLE  
OLDSMAR, FL. US 34677

The mailing address of the Limited Liability Company is:  
115 BRENT CIRCLE  
OLDSMAR, FL. US 34677

**Article III**

Other provisions, if any:  
CONSULTING SERVICES

**Article IV**

The name and Florida street address of the registered agent is:  
JACQUELINE PHILLIPS  
115 BRENT CIRCLE  
OLDSMAR, FL. 34677

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: JACQUELINE PHILLIPS

### **Article V**

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

Title: MGR  
JACQUELINE PHILLIPS  
115 BRENT CIR  
OLDSMAR, FL. 34677 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

01/24/2019

Signature of member or an authorized representative

Electronic Signature: JACQUELINE PHILLIPS

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.