2/7/25, 12:27 PM

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000048099 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SMITH HULSEY & BUSEY

Account Number : 075030000653 : (904)359-7700 Phone Fax Number : (904)359-7708

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

| Cmail. | Address: | | | |
|--------|----------|--|--|--|
| | | | | |

FLORIDA LIMITED LIABILITY CO.

Thack Medical, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

Page: 3 of 4

(((H25000048099 3)))

ARTICLES OF ORGANIZATION

OF

THACK MEDICAL, LLC

The undersigned organizer, who is the authorized representative of Thack Medical, LLC (the "Company") under the Florida Revised Limited Liability Company Act, hereby adopts the following Articles of Organization.

ARTICLE I - NAME

The name of this Company is Thack Medical, LLC

ARTICLE II - PRINCIPAL OFFICE

The street address and the mailing address of the principal office of the Company are 13504 Citicards Way, Unit 2214, Jacksonville, Florida 32258.

ARTICLE III - INITIAL REGISTERED AGENT AND ADDRESS

The name and street address of the initial registered agent are Justin Clay and 13504 Citicards Way, Unit 2214, Jacksonville, Florida 32258.

ARTICLE IV - MANAGEMENT

The Company shall be a manager-managed company. The name of the initial manager is Justin Clay.

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization on February ______. 2025

Justin Clay
Authorized Representative

AN 12: 54

Authorized Representative

(((H25000048099 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0113, Florida Statutes, Thack Medical, LLC, a Florida limited liability company, submits the following statement to designate a registered office and registered agent in the state of Florida.

- 1. The name of the Limited Liability Company is Thack Medical, LLC.
- 2. The name and the Florida street address of the registered agent and office are Justin Clay and 13504 Citicards Way, Unit 2214, Jacksonville, Florida 32258.

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. Justin Clay hereby accepts the appointment as registered agent and agrees to act in this capacity. Justin Clay further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 605, F.S.

Justin Clay

Date: February 7, 2025

4909-0496-3607, v. 1

25 FFR - 7 AMI2: 51