## Electronic Articles of Organization For Florida Limited Liability Company February 03, 2025 Fig. 7, 1814

Article I

The name of the Limited Liability Company is:

ON CALL WOUND CARE, LLC

## **Article II**

The street address of the principal office of the Limited Liability Company is:

909 SE 47TH TERRACE 203-1 CAPE CORAL, FL. UN 33904

The mailing address of the Limited Liability Company is:

909 SE 47TH TERRACE 203-1 CAPE CORAL, FL. UN 33904

## **Article III**

The name and Florida street address of the registered agent is:

BEATRIZ COCCARO WORD 2518 SE 22ND PLACE CAPE CORAL, FL. 33904

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 actin this capacity. I further agree to comply with the provisions of all statutes relating to the place and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: BEATRIZ COCCARO WORD

Signature of member or an authorized representative

Electronic Signature: BEATRIZ COCCARO WORD

I am the member or authorized representative submitting these Articles of Organization and affirm that the fact estated herein regime. I am aware that false information submitted in a document to the Department of State constitutes a third legree felony as provided for in s.817.155, F.S. I understand the requirement to file at 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.