



Division of Business and Charitable Organizations
Department of State
State of Tennessee
312 Rosa L. Parks Avenue, 6th Floor
Nashville, Tennessee 37243
Phone: 615-741-2286
sos.tn.gov/

Tre Hargett
Secretary of State

Capital Filing Service
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NASHVILLE, TN 37205, USA

Request Type: Certified Copies
Order #: C2025027839

Issuance Date: 04/29/2025
Copies Requested: 1

Document Receipt

Receipt #: 2025-316855
Payment: Credit Card - 3897376693

Filing Fee: \$20.00
\$20.00

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that **STATESERV MEDICAL OF TENNESSEE, LLC**, Control # 001432096 was formed or qualified to do business in the State of Tennessee on 05/31/2023. STATESERV MEDICAL OF TENNESSEE, LLC has a home jurisdiction of TENNESSEE and is currently in Active status. The attached documents are true and correct copies and were filed in this office on the date(s) indicated below.

Tre Hargett
Secretary of State

Tracking #	Date Filed	Filing Description
B1333-9861	05/31/2023	Initial Filing for StateServ Medical of Tennessee, LLC
B1344-2826	09/28/2023	Amended and Restated Formation Documents for StateServ Medical of Tennessee, LLC
B1543-2432	04/01/2024	2023 Annual Report for StateServ Medical of Tennessee, LLC
B1633-3002	01/15/2025	Assumed Name for StateServ Medical of Tennessee, LLC
B2025080493	03/13/2025	2024 Annual Report for STATESERV MEDICAL OF TENNESSEE, LLC

**ARTICLES OF ORGANIZATION
OF
STATESERV MEDICAL OF TENNESSEE, LLC**

The undersigned states as follows:

ARTICLE 1. The name of the limited liability company is StateServ Medical of Tennessee, LLC

ARTICLE 2. The name and complete address of the limited liability company's initial registered agent and office located in the state of Tennessee is:

C T Corporation System
300 Montvue Rd
Knoxville, TN 37919
Knox County

ARTICLE 3. Fiscal Year Close Month: December

ARTICLE 4. The limited liability company will be Manager-Managed


ARTICLE 5. The limited liability company will have one (1) Member at the date of filing.

ARTICLE 6. The duration of this limited liability company is Perpetual.

ARTICLE 6. The complete address of the limited liability company's principal executive office is:

1201 S Alma School Rd Ste 4000
Mesa, AZ 85210
Maricopa County
safetyandcompliance@stateserv.com

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization as of this 30th day of May, 2023.


Matthew Rapier, Organizer

FOR INFORMATIONAL PURPOSES ONLY

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**AMENDED AND RESTATED ARTICLES OF ORGANIZATION
OF
STATESERV MEDICAL OF TENNESSEE, LLC**

(Pursuant to § 48-249-204 of the Tennessee Code)

StateServ Medical of Tennessee, LLC, (the "Company") a limited liability company organized and existing under and by virtue of the provisions of the Tennessee Code (the "Code"), does hereby certify:

A. The present name of the Limited Liability Company is StateServ Medical of Tennessee, LLC.

B. The original Articles of Organization of the Company was filed with the Division of Business Services of the Department of State of Tennessee on May 31, 2023.

C. This Amended and Restated Articles of Organization, which amends and restates the Company's Articles of Organization in its entirety, has been duly adopted and approved in all respects by the sole manager of the Company as of September 28, 2023 pursuant to the provisions of § 48-249-204(b) of the Code.

D. This Amended and Restated Articles of Organization restates and integrates and further amends the Articles of Organization as herein set forth in full:

1. Name. The name of the Company is **StateServ Medical of Tennessee, LLC**.

2. Registered Office. The address of the Company's registered agent and office in the State of Tennessee and Knox County is 300 Montvue Rd, Knoxville, TN 37919. The name of the registered agent at such address is C T Corporation System.

3. Fiscal Year. The Company's fiscal year close month is December.

4. Management. The Company will be manager-managed.

5. Duration. The duration of the Company is perpetual.

6. Principal Office. The address of the Company's principal executive office in the State of Arizona and Maricopa County is 1201 S Alma School Rd, Suite 4000, Mesa, AZ 85210.

IN WITNESS WHEREOF, the undersigned Authorized Person has duly executed
this Amended and Restated Articles of Organization as of September 28, 2023.

DocuSigned by:
By: Elliott Amundson
Name: Elliott Amundson
Title: Authorized Person

[Signature Page to A&R Charter of StateSev Medical of Tennessee, LLC]



10233500

**Tennessee Limited Liability Company Annual Report Form**

AR Filing #: 10233500

File online at: <https://TNBear.TN.gov/>

FILED: Apr 1, 2024 4:17PM

Due on/Before: 04/01/2024

Reporting Year: 2023

Annual Report Filing Fee Due:

\$300 minimum plus \$50 for each member over 6 to a maximum of \$3000
\$20 additional if changes are made in block 3 to the registered agent/office

This Annual Report has been successfully paid for and filed. Please keep this report for your records.

Payment-Credit Card - State Payment Center - CC #: 3870972390

SOS Control Number: 1432096

Limited Liability Company - Domestic

Date Formed: 05/31/2023

Formation Locale: TENNESSEE

(1) Name and Mailing Address:

StateServ Medical of Tennessee, LLC
STE 4000
1201 S ALMA SCHOOL RD
MESA, AZ 85210

(2) Principal Office Address:

SUITE 412 AND 413
4295 CROMWELL ROAD
CHATTANOOGA, TN 87421

(3) Registered Agent (RA) and Registered Office (RO) Address:

C T CORPORATION SYSTEM
300 MONTVUE RD
KNOXVILLE, TN 37919-5546

Agent Changed: NoAgent County: KNOX COUNTY

(4) This LLC is (as currently registered in Tennessee): Director Managed, X Manager Managed, Member Managed, Board Managed (appropriate if formed prior to 1/1/2006 only).

If board, director, or manager managed, provide the names and business addresses, including zip codes, of the governors, directors, or managers (or their equivalent). If governed by the pre-2006 LLC act and board managed, list board members and managers.

Name	Business Address	City, State, Zip
Paul DiCosmo	1201 SOUTH ALMA SCHOOL ROAD SUITE 4000	MESA, AZ 85210

(5) Provide the names and business addresses, including zip codes, of any LLC Officers (if governed by the Revised LLC Act), or their equivalent.

Name	Business Address	City, State, Zip
Paul DiCosmo	1201 SOUTH ALMA SCHOOL ROAD SUITE 4000	MESA, AZ 85210
Christopher Roode	1201 SOUTH ALMA SCHOOL ROAD SUITE 4000	MESA, AZ 85210

(6) Number of members on the date the annual report is executed: 1

 This LLC is prohibited from doing business in Tennessee (check if applicable)

(7) Signature: Electronic(8) Date: 04/01/2024(9) Type/Print Name: Alicia Smith(10) Title: Compliance Specialist

B1633-3002 01/15/2025 10:52 AM Received by Tennessee Secretary of State Tre Hargett

APPLICATION FOR REGISTRATION OF ASSUMED NAME

SS-4402



Division of Business and Charitable Organizations
Tre Hargett, Secretary of State
State of Tennessee
312 Rosa L. Parks Avenue, 6th Floor
Nashville, Tennessee 37243-1102
(615) 741-2286

For Office Use Only

Pursuant to the provisions of § 48-14-101(d) of the Tennessee Business Corporation Act or § 48-54-101(d) of the Tennessee Nonprofit Corporation Act, or Section 48-207-101(d) of the Tennessee Limited Liability Act, or Section 48-249-106(d) of the Tennessee Revised Limited Liability Act, or Section 61-1-1003 of the Tennessee Uniform Partnership Act, or Section 61-3-101 of the Limited Partnership Act of 2017, the undersigned entity hereby submits this application:


1. The true name of the entity is: STATESERV MEDICAL OF TENNESSEE, LLC
2. The state or country of formation is: Tennessee
3. The entity intends to transact business in Tennessee under an assumed name.
4. The assumed name the entity proposes to use is: Dragonfly Health

[NOTE: The assumed name must meet the requirements of § 48-14-101(d) of the Tennessee Business Corporation Act or § 48-54-101(d) of the Tennessee Nonprofit Corporation Act., or Section 48-207-101(d) of the Tennessee Limited Liability Act, or Section 48-249-106(d) of the Tennessee Revised Limited Liability Act, or Section 61-1-1003 of the Tennessee Uniform Partnership Act, or Section 61-3-101 of the Limited Partnership Act of 2017.]

1/8/25
Signature Date

COO
Signer's Capacity

StateServ Medical of Tennessee, LLC
Name of Entity


Signature

Christopher Roode
Name (typed or printed)

Tracking Number
B2025080493



Tre Hargett
Secretary of State

Annual Report

Division of Business and Charitable Organizations
Department of State

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Control #: 001432096
Filed: 03/13/2025 01:05 PM
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Entity Information

Business Name: STATESERV MEDICAL OF TENNESSEE, LLC

Entity Type: Limited Liability Company

Place of Formation: TENNESSEE

Principal Office Address:

4295 Cromwell Rd Ste 412
Chattanooga, TN 37421, USA

Control Number: 001432096

Managed Type: Manager Managed

Mailing Address:

4295 Cromwell Rd Ste 412
Chattanooga, TN 37421, USA

Nature of Business (NAICS):

532283 - Home Health Equipment Rental

Number of Members: 6 or Less

Officer Information

PAUL DICOSMO

1201 S. ALMA SCHOOL RD, SUITE 4000
MESA, AZ 85210, USA
Manager

CHRISTOPHER ROODE

1201 S. ALMA SCHOOL RD, SUITE 4000
MESA, AZ 85210, USA
Manager

Registered Agent Information

C T CORPORATION SYSTEM
300 MONTVUE RD
KNOXVILLE, TN 37919-5546

Signature

☒ By entering my name in the space provided below, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day.

Signed Electronically: ERIN YARES

Date: 03/13/2025

Title: POWER OF ATTORNEY