

# L10000083560

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200183955562

08/09/10---01063--003 \*\*125.00

FILED  
2010 AUG - 9 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
AUG 10 2010  
EXAMINER

## THE SANDERS LAW FIRM, P.C.

3525 Piedmont Road  
7 Piedmont Center, Suite 300  
Atlanta, Georgia 30305

(404) 364-1819  
(866) 871-2238 Fax  
rsanders@rdslaw.com

August 6, 2010

### Mailing Address

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314  
(805) 245-6051

### Street/Courier Address

Registration Section  
Division of Corporations  
Clifton Building 2661 Executive Center Circle  
Tallahassee, FL 32301  
(850) 245-6051

### **RE: The Julian Institute of Plastic Surgery, PLLC**

Registration Section,

This letter accompanies the Articles of Organization for The Julian Institute of Plastic Surgery, PLLC, as well as the filing fee of \$125.00.

Should you have any questions regarding the Articles of Organization, please do not hesitate to contact me at 3525 Piedmont Road, 7 Piedmont Center, Suite 300, Atlanta, Georgia 30305 or (404) 364-1819.

Sincerely,

THE SANDERS LAW FIRM, P.C.



Richard D. Sanders

Articles of Organization  
of  
The Julian Institute of Plastic Surgery, PLLC

FILED  
2010 AUG -9 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Article 1.

The name of the Limited Liability Company shall be The Julian Institute of Plastic Surgery, PLLC.

Purpose: Plastic Surgery Consulting + services to Patients,

Article 2.

The mailing address and the street address of the principal office of the Limited Liability Company is 10429 Spring Hill Drive, Spring Hill, Florida 34608.

Article 3.

The registered agent of the Limited Liability Company shall be Marc Polecritti, D.O., whose office is located at 10429 Spring Hill Drive, Spring Hill, Florida 34608. The registered agent's statement and signature at the bottom of this document represent that the registered agent is familiar with and accepts the obligations of this position.

Article 4.

The Manger (MGR) of the Limited Liability Company shall be Marc Polecritti, D.O., whose address is the same as in the previous Article.

Article 5.

The Articles of Organization will become effective on September 1, 2010.

IN WITNESS THEREOF, the undersigned Member executed these Articles of Organization on this the 6 day of August, 2010.

Richard D. Sanders  
The Sanders Law Firm, P.C.  
3525 Piedmont Road  
7 Piedmont Center, Suite 300  
Atlanta, Georgia 30305

Marc Polecristi  
Member Name

[Signature]  
Signature

I, Marc Polecristi, hereby state that I am familiar with and accept the obligations of the position of registered agent.

Marc Polecristi  
Registered Agent Name

[Signature]  
Signature

FILED  
2010 AUG - 9 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA