# LILEO000072828

(Requ	estor's Name)	
. (Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	me)
(Docu	ment Number)	-
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



700284596527

04/14/16--01003--013 \*\*655.00

TO ACKNOWLEDGE SUFFICIENCY OF FILING 16 APR 15 AM 10: 25

16 KPR 15 PHID: 5"

APR 1 5 2016

T SCHROEDER

### SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724 Toll Free: 844-541-6792

DATE: 4-15-16	<del></del>		WALK IN
ENTITY NAME:	PAS DEVELO	SPHENT	
	SERVICES	LLC	
**PLEA	SE FILE THE ATTA	CHED AND RET	URN:**
Plain Copy			
Certified Copy			
<u>-</u>			
**PLEASE OBT	AIN THE FOLLOWIN	VG FOR THE AB	OVE ENTITY:**
Document Number:_			·
Certified Copy	of Arts & Amendm	ents	
Certificate of G	iood Standing		·
***	OSTILLE'/NOTARIA	L CERTIFICATIO	N:**
COUNTRY OF DEST	INATION		·····
NUMBER OF CERTI	FICATES REQUESTE	ED	<del></del>
TOTAL AMOUNT ON	WED: 125-		**************************************
CHECK NUMBER:_(	credit		
PLEASE CONTACT TINA AT	850-508-1891 FOR ANY	PROBLEMS OR INFO	RMATION ON THIS
MATTER.			
Thank you!			
Tina Goff, President			

## ARTICLES OF ORGANIZATION OF PAS DEVELOPMENT SERVICES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, pursuant to Chapter 605 of the Florida Statutes, hereby makes, acknowledges and files the following Articles of Organization (the "Articles").

#### ARTICLE I. NAME

The name of the limited liability company is PAS Development Services, LLC (the "Company").

#### ARTICLE II. MAILING AND STREET ADDRESS

The mailing address and street address of the principal office of the Company shall be 1108 S. State Street, Suite 108, Bunnell, Florida 32110.

#### ARTICLE III. REGISTERED AGENT AND OFFICE

The name of the initial registered agent and the street address of the initial registered agent of the Company in the State of Florida is Maria Chang Mayer, 1101 Brickell Ave., Suite N401, Miami, Florida 33131.

#### ARTICLE IV. DURATION

The Company shall commence its existence on the date that the Articles are filed with the Florida Department of State. The Company's existence shall be perpetual, unless the Company is earlier dissolved as provided in the Operating Agreement.

#### ARTICLE V. MANAGEMENT

The Company shall be manager managed. The initial Manager of the Company will be Physician Audiology Services, Inc., a Florida corporation, with an address at 1108 S. State Street, Suite 108, Bunnell, Florida 32110.

#### ARTICLE VI. AUTHORIZED REPRESENTATIVE

The name and address of the authorized representative of the organizing member of the Company executing these articles of organization are:

Name

**Address** 

Maria Chang Mayer

1101 Brickell Avenue

Suite N401

Miami, Florida 33131

IN WITNESS WHEREOF, the undersigned has made and subscribed to these Articles of Organization on April 14, 2016.

Maria Chang Mayer

Authorized Representative

#### ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in that capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the duties and obligations of the undersigned's position as registered agent.

Dated this 14th day of April, 2016.

Maria Chang Mayer

3

16 新昭 15 四 12:54