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THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 537086 11354A

AUTHORIZATION :

Patricia Pignatelli

COST LIMIT : \$155.00

ORDER DATE : January 4, 2000

ORDER TIME : 10:16 AM

ORDER NO. : 537086-010

CUSTOMER NO: 11354A

CUSTOMER: Ms. Katie Moore
DELL GRAHAM WILLCOX BARBER
DELL GRAHAM WILLCOX BARBER
P. O. Box 850

Gainesville, FL 32602

DOMESTIC FILING

NAME: FTAL MILLHOPPER NEPHROLOGY
ASSOCIATES, L.C.

EFFECTIVE DATE: ..

XX ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Carrie Vaught

EXAMINER'S INITIALS:

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 JAN -4 AM 11:24

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JAN -4 PM 12:35

APPROVED
AND
FILED

1400

Articles of Organization of
FTAL MILLHOPPER NEPHROLOGY ASSOCIATES, L.C.

ARTICLE I - NAME

The name of this Limited Liability Company shall be FTAL MILLHOPPER NEPHROLOGY ASSOCIATES, L.C.

ARTICLE II - DURATION

The period of duration of this Limited Liability Company shall be perpetual.

ARTICLE III - PURPOSE

The nature of the business to be transacted by this Limited Liability Company and the purpose hereof is to acquire, own, develop, finance, lease, sell, or otherwise dispose of real property and to engage in any other lawful business or endeavor.

ARTICLE IV - MAILING ADDRESS AND STREET ADDRESS

The initial street address of the principal office of this Limited Liability Company in the State of Florida and the mailing address is 6685 N.W. 9th Blvd., Gainesville, Florida 32605, which is the initial registered office of the Limited Liability Company.

ARTICLE V - NAME AND STREET ADDRESS OF REGISTERED AGENT

The name and street address of the initial registered agent in this state for this Limited Liability Company is Gordon C. Finlayson, M.D., 6685 N.W. 9th Blvd., Gainesville, Florida 32605.

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TALLAHASSEE, FLORIDA

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ARTICLE VI - ADDITIONAL MEMBERS

New members may be admitted upon the unanimous vote of the members.

ARTICLE VII – CONTINUATION OF BUSINESS

The remaining members of the Limited Liability Company may continue the business of the Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company upon majority vote.

ARTICLE VIII - MANAGEMENT BY MEMBERS

Management of the Limited Liability Company shall be by the Managing Members. The names and addresses of the Managing Members are:

Gordon C. Finlayson, M.D.	6685 N.W. 9 th Blvd. Gainesville, Florida 32605
Darrell G. Tarrant, M.D.	6685 N.W. 9 th Blvd. Gainesville, Florida 32605
Paul A. Alfino, M.D.	6685 N.W. 9 th Blvd. Gainesville, Florida 32605
Carlos E. Lopez-Nieto, M.D.	6685 N.W. 9 th Blvd. Gainesville, Florida 32605

ARTICLE IX– OPERATING AGREEMENT

The power to adopt, alter, amend, and repeal the Operating Agreement is vested in the Managing Members.

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

At Gainesville, Florida, this 17th day of November, 1999.

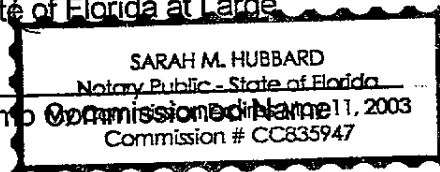
Gordon C. Finlayson
Gordon C. Finlayson, M.D.

STATE OF FLORIDA
COUNTY OF ALACHUA

The foregoing instrument was acknowledged before me this 17th day of November, 1999, by Gordon C. Finlayson, M.D.

Sarah M. Hubbard
Notary Public, State of Florida at Large

Print, Type or Stamp of Notary Public
Commissioned in Name of Notary Public



Personally Known ☒ OR Produced Identification _____
Type of Identification Produced:

- ☐ Current Florida Driver's License
☐ Other _____


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT

I HEREBY ACCEPT appointment as Registered Agent for FTAL MILLHOPPER
NEPHROLOGY ASSOCIATES, L.C., on whom process may be served in the State of
Florida. I am familiar with and accept the duties and responsibilities as Registered Agent
for said limited liability company, all pursuant to Florida Statutes 608.415.

DATED this 17th day of November, 1999.



Gordon C. Finlayson, M.D.
Registered Agent

00 161-4 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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