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Florida Department of State
Division of Corporations
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To:
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LIMITED LIABILITY COMPANY

coastal family practice, llc

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$125.00

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Coastal Family Practice, LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

1984 State Road 44, New Smyrna Beach FL 32168

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Patricia Fredette

1984 State Road 44
Florida street address (P.O. Box NOT acceptable)

New Smyrna Beach FL 32168
City, State, and Zip

L00-9057

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 act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Patricia Fredette 7/24/00
Registered Agent's Signature

Patricia Fredette

Article IV - Management (Check box if applicable.)
☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Patricia Fredette 7/24/00
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Patricia Fredette, Member
Typed or printed name of signee

FILING FEES:
$ 100.00 Filing Fee for Articles of Organization
$ 25.00 Designation of Registered Agent
$ 30.00 Certified Copy (OPTIONAL)
$ 5.00 Certificate of Status (OPTIONAL)

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Patricia Fredette 7/24/00
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Patricia Fredette, Member
Typed or printed name of signee

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