

12/12/00

10:47 FAX 904 6762615

PYLE/W

001

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H00000064617 4))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 922-4003

From: Account Name : MICHAEL A. PYLE, P.A.
Account Number : I20000000053
Phone : (904) 615-9007
Fax Number : (904) 676-2615

LIMITED LIABILITY COMPANY AL

Ormond Naprothy Clinic, LLC

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

Electronic Filing Menu

Corporate Filing

Public Access Help

H00000064617 4

ARTICLES OF ORGANIZATION**OF****ORMOND NAPROPATHY CLINIC, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, hereby executes the following Articles of Organization.

ARTICLE I. NAME

The name of the Limited Liability Company is: **Ormond Napropathy Clinic, LLC**

ARTICLE II. ADDRESS

The street address and the mailing address of the principal office of the Company is: 115 E. Granada Boulevard, Suite 4, Ormond Beach, Florida 32174.

ARTICLE III. REGISTERED OFFICE AND AGENT

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

Mun Lee Lopez
115 E. Granada Boulevard, Suite 4
Ormond Beach, Florida 32174

IN WITNESS WHEREOF, the undersigned Member has executed these Articles of Organization on this 9th day of ~~November~~, 2000.
December


MUN LEE LOPEZ
Member

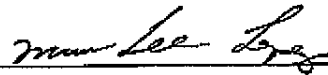
(In accordance with Section 608.408(2), *Florida Statutes*, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

H00000064617 4

H00000064617 4

ACCEPTANCE OF DESIGNATION

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, *Florida Statutes*.



Mun Lee Lopez
Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 DEC 12 PM 1:05

H00000064617 4