

L01000001136

Florida Department of State

Division of Corporations

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To:

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

From:

Account Name : DAVIS & JONES, P.A.
Account Number : I20000000063
Phone : (305) 665-5758
Fax Number : (305) 665-5634

LIMITED LIABILITY COMPANY

Doctor and Doctor, P.L.

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01 JAN 23 PM 5:00RECEIVED
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**ARTICLES OF ORGANIZATION FOR
FLORIDA PROFESSIONAL LIMITED LIABILITY COMPANY**

The undersigned, for the purpose of forming a limited liability company under Florida Statutes Chapters 608 and 621, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - The name of the Professional Limited Liability Company is **Doctor and Doctor, P.L.**


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

8290 Lake Drive, #548
Miami, FL 33166

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

Jesse C. Jones
1500 San Remo Avenue, Suite 225
Coral Gables, FL 33146-3047

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.



Registered Agent's Signature

ARTICLE IV - The Professional Limited Liability Company is to be managed by a manager and is, therefore, a manager-managed company.



Jesse C. Jones
Agent and Attorney for
Dr. Christopher Pudol

(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.)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 JAN 23 PM 5:00