

L010000010900
**ATLANTIC MEDICAL
SPECIALISTS, L.L.C.**

David U. Arango, M.D.
Scott E. Okarski, D.C.
279 South Yonge Street
Ormond Beach, Florida 32174

Phone (386) 672-6642
Fax (386) 677-1081

Registration Section
Division of Corporations
409 East Gaines Street
P.O. Box 6327
Tallahassee, Florida 32314

To whom it may concern,

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*****160.00 *****160.00

Please find the enclosed articles of organization for Atlantic Medical Specialists, L.L.C. to become a Florida limited liability company. There is a check enclosed to cover filing fees for articles of organization, designation of registered agent, certified copy, and certificate of status in the amount of \$160.00.

Thank you for your help in this matter,

Scott E. Okarski

Scott E. Okarski, D.C.

279 South Yonge Street
Ormond Beach, FL 32174
(386) 672-6642

FILED
01 JUL - 6 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

member/representative
must sign

Name Availability	
Document Examiner	DCC
Updater	DCC
Updater Verifier	DCC
Acknowledgement	DCC
W. M. Verifier	DCC

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FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 21, 2001

SCOTT E. OKARSKI, D.C.
ATLANTIC MEDICAL SPECIALISTS, L.L.C.
279 SOUTH YOUNG STREET
ORMOND BEACH, FL 32174

SUBJECT: ATLANTIC MEDICAL SPECIALISTS, L.L.C.
Ref. Number: W01000014303

We have received your document for ATLANTIC MEDICAL SPECIALISTS, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Diane Cushing
Corporate Specialist

Letter Number: 101A00037707

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: ATLANTIC MEDICAL SPECIALISTS, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

279 SOUTH YONGE ST.
ORMOND BEACH, FL 32174

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

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

SCOTT E. OKARSKI

Name

279 SOUTH YONGE ST

Florida street address (P.O. Box NOT acceptable)

ORMOND BEACH, FL 32174

City, State, and Zip

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.

Scott E. Okarski

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers, and therefore, a manager - managed company.

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

Scott E. Okarski

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.)

SCOTT E. OKARSKI

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)

FILED
JUL - 6 PM 2:55
CLERK OF STATE
TALLAHASSEE, FLORIDA