



L0100000/6984

ACCOUNT NO. : 072100000032

REFERENCE : 756049 8941A

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 155.00

ORDER DATE : October 2, 2001

ORDER TIME : 3:23 PM

ORDER NO. : 756049-005

CUSTOMER NO: 8941A

CUSTOMER: Joni Ferrer, Legal Asst
Bruce D. Green, Esq

200004622492--7

Suite 400
600 South Andrews Avenue
Ft. Lauderdale, FL 33301

DOMESTIC FILING

NAME: E R URGENT CARE CENTER III,
LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT.1133

EXAMINER'S INITIALS:

JP
10-4-01

01 OCT -3 AM 9:13
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FL 32304
DIVISION OF CORPORATION

APPROVED
AND
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

E R URGENT CARE CENTER III, LLC

ARTICLE II - Address:

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

300 Arthur Godfrey Road, Suite #100, Miami, Florida 33140

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

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

<u>Corporation Service Company</u>		
Name		
<u>1201 Hays Street</u>		
Florida street address (P.O. Box NOT acceptable)		
<u>Tallahassee</u>	<u>FL</u>	<u>32301</u>
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.

Corporation Service Company

By: Laura R. Dunlap
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)

Laura R. Dunlap
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.)

Laura R. Dunlap
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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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E R URGENT CARE CENTER III, LLC
MANAGING MEMBER

E R URGENT CARE MANAGEMENT CO., INC.
Managing Member
400 Arthur Godfrey Road, Suite 250, Miami, Florida 33140

jkg

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of E R URGENT CARE CENTER III, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 11 day of October, 2001.


Signature

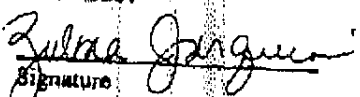
Jerry Miller
Print Name of Signer

WITNESS:


Signature

Barbara Miller
Print Name of Witness

WITNESS:


Signature

Zulma Jarquin
Print Name of Witness

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA