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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
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AL

LIMITED LIABILITY COMPANY

ACCURATE MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN 28

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ARTICLES OF ORGANIZATION OF
ACCURATE MANAGEMENT, LLC
A FLORIDA LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 JAN 28

The undersigned desiring to form a Limited Liability Company under and pursuant to Section 608.404 of the Limited Liability Act, pursuant to Chapter 608 of the Florida Statutes, of the State of Florida, do hereby certify as follows:

FIRST: The name of said limited liability company shall be ACCURATE MANAGEMENT, LLC, and the mailing address and the street address of the principal office of the limited liability company shall be 3682 Sand Simeon Circle, Weston, Florida 33331.

SECOND: ACCURATE MANAGEMENT, LLC, shall have a perpetual duration from the date of filing of these Articles of Organization.

THIRD: The purposes for which, ACCURATE MANAGEMENT, LLC is formed are:

(A) to engage in any and all lawful acts or activities for which limited liability companies may be formed under Chapter 608 of the Statutes of the State of Florida.

FOURTH: The maximum number of ownership units which, ACCURATE MANAGEMENT, LLC, is authorized to have outstanding is one hundred (100), all of which shall be identical units, and each of which shall represent the ownership of that percentage of the total units outstanding at any time as is the equivalent of the ratio in which one (1) is the numerator and the total units outstanding is the denominator.

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FIFTH: The limited liability company shall be manager-managed and will have three (3) Members:

Name: GABRIELA LASERNA SILVA

Percentage of Ownership: 33%

Name: YOLANDA PATRICIA GAMA HERNANDEZ

Percentage of Ownership: 33%

Name: SOUTH DENTAL CLINIC


Percentage of Ownership: 33%

SIXTH: The name and mailing address of the company's registered agent is GRISALES & ALFANO, LLC, whose mailing address is 999 Brickell Avenue, Suite 700, Miami, Florida 33131.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 23rd day of January, 2002.


By: Gabriela Laserna Silva

Member


South Dental Clinic, Member

By: Efrén Morales


By: Yolanda Patricia Gama Hernandez

Member

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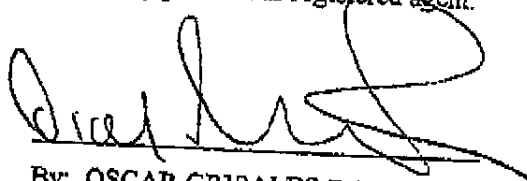
Designation and Acceptance of Registered Agent

Pursuant to the provisions of Florida Statutes, the undersigned limited liability Company organized under the laws of the State of Florida submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the limited liability Company is ACCURATE MANAGEMENT, LLC
2. The name of the registered agent is GRISALES & ALFANO, LLC
3. The address of the registered agent/registered office is 999 Brickell Avenue, Suite 700, Miami, Florida 33131.

Acceptance

Having been named as registered agent and designated to accept service of process for the above limited liability company, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision 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.



By: OSCAR GRISALES-RACINI, ESQ
For the Firm

Date: January 23, 2002

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