

Florida Department of State

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Division of Corporations

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Prom:

Account Name : BRUCE A. HAUGHT, P.A.

Account Number : 119980000079 Phone (850)837-7021 (850)837-8121 Fax Number

10650

#### LIMITED LIABILITY COMPANY

LORDEX SPINE CARE CENTER - PENSACOLA, L.L.C.

Certificate of Status	0
Certified Copy	0
Pege Count	04
Estimated Charge	\$125.00

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 16, 2002 ....

BRUCE A. HAUGHT, P.A.

SUBJECT: LORDEX SPINE CARE CNETER - PENSACOLA, L.L.C. REF: W02000010650

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SECNETARY OF STATE
TALL AHASSEF FLORID.

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# ARTICLES OF ORGANIZATION OF LORDEX SPINE CARE CENTER-PENSACOLA, L.L.C.

The undersigned subscribers, hereby form a limited liability company under the laws of the State of Florida, Florida Statutes. Chapter 608 as follows:

# ARTICLE I

The name of this limited liability company shall be LORDEX SPINE CARE CENTER-PENSACOLA, L.L.C.

# ARTICLE II DURATION

This limited liability company shall exist no longer than Twenty Five (25) years from the date of filing with the Department of State.

#### ARTICLE III PURPOSE AND POWERS

This limited liability company is organized for the purpose of conducting any and all lawful business not in conflict with the Statutes of the State of Florida. This limited liability company shall have all powers enumerated in Chapter 608 mentioned above.

# ARTICLE IV PRINCIPAL OFFICE AND MAILING ADDRESS

The principal place of business and mailing address of the limited liability company is 5514 North Davis Highway, Suite 119, Pensacola, FL 32503.

# ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this limited liability company is 385 Highway 98. Suite 220, Destin, FL 32541, and the name of the initial registered agent at that address is Bruce A. Haught.

#### ARTICLE VI MANAGEMENT

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#### (((H02000086072 4)))

The management will consist of two (2) managers. Each member shall elect One (1) manager. The names and addresses of the initial managers of the limited liability company are as follows:

Lee Perry

Kevin Ronan

5514 North Davis Highway, Suite 119

5514 North Davis Highway, Suite 119

Pensacola, FL 32503

Pensacola, FL 32503

## ARTICLE XIII INDIVIDUALS FORMING COMPANY

The names and addresses of the Members of this limited liability company are as follows:

Lee Perry

Kevin Ronan

5514 North Davis Highway, Suite 119

5514 North Davis Highway, Suite 119

Pensacola, FL 32503

Pensacola, FL 32503

and their authorized representative for purposes of executing these Articles of Organization is Bruce A. Haught, 36468 Emerald Coast Pkwy., Suite 2101, Destin, FL 32541.

### ARTICLE XIV ADDITIONAL MEMBERS

The members of the limited liability company shall have the right to admit additional members upon unanimous written consent of all the members of the company existing at that time.

## ARTICLE XVII DISSOLUTION

Upon the death, retirement, resignation, expulsion or dissolution of any member of this limited liability company or the occurrence of any other event which terminates the continued membership of a member of the limited liability company, the limited liability company shall be terminated unless the business is continued by the consent of all remaining members.

# ARTICLE XVIII TRANSFER OF INTEREST

A member may transfer that member's right to receive shares of profits and returns of capital contributions, but may not assign any of the rights to participate in the management or to be a member of the limited liability company unless prior written consent is obtained by the transferor from all remaining members.

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# ARTICLE XIV INITIAL CAPITAL CONTRIBUTION

The total amount of cash and a description of the agreed value of property other than cash initially contributed to the Company is \$1,000.00 in cash and no other property is being contributed to the Company at this time.

# ARTICLE XV ADDITIONAL CAPITAL CONTRIBUTIONS

The total additional contributions, if any, agreed to be made by all Members and the times at which, or the events of happenings of which, that shall be made, are as follows: No total additional contributions have been agreed to at the date of filing of these Articles of Organization. Additional contributions, if any, will be made upon unanimous agreement of all of the Members of the Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles on the 15th day of April, 2002, as the authorized representative of the Members of the company identified above.

By:

Bruce A. Haught

STATE OF FLORIDA COUNTY OF OKALOOSA

The foregoing instrument was acknowledged before me this 15th day of April, 2002, and who personally appeared Bruce A. Haught, who is personally known to me and did not take an oath.

IN WITNESS WHEREOF my hand and official seal in the State and County last aforesaid this 15th day of April, 2002.

NOTABY BUILT

Barbora M Hynes

A Day + My Commission GC841085

Expires May 31 2003

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### CERTIFICATE DESIGNATING OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF 608.415, FLORIDA STATUTES, THE REFERENCED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATION THE REGISTERED AGENT/OFFICE, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: LORDEX SPINE CARE CENTER-PENSACOLA, L.L.C.
- 2. The name and address of the registered agent and offices is: Bruce A. Haught, 385 Highway 98, Suite 220, Destin, FL 32541.

Having been named as registered agent and to accept services 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.

Dated this the 15th day of April, 2002.

By:

Bruce A Haught, Registered Agent