

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000305484 3)))



H120003054843ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P
Account Number : 073222003555
Phone : (561) 686-3307
Fax Number : (561) 471-0894

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: bman@nasonyeager.com

RECEIVED
12 DEC 31 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TEQUESTA URGENT CARE LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help **BRYAN**

JAN -2

EXAMINER

12/31/2012

**AMENDED AND RESTATED
ARTICLES OF ORGANIZATION
OF
TEQUESTA URGENT CARE, LLC**

FILED
2012 DEC 31 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, the undersigned Manager hereby makes, acknowledges and files these Amended and Restated Articles of Organization for which amends and restates the Articles of Organization in its entirety filed June 4, 2002 and as amended by that certain amendment filed December 27, 2012 for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE I
NAME**

The name of this Limited Liability Company is:

Tequesta Urgent Care, LLC

**ARTICLE II
ADDRESS**

The street address of the principal office is:

One Main Street, Suite 102
Tequesta, FL 33469

The mailing address is:

12 Elaine Court
Woodcliff Lake, NJ 07677

**ARTICLE III
DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

2012 DEC 31 AM 8:22
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV
MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Manager and is, therefore, a manager-managed company.


The name and address of the manager is:

Title: Manager
Robert Rodriguez
One Main Street, Suite 102
Tequesta, FL 33469

ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS

The Members shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this ____ day of December, 2012.


Robert Rodriguez, Manager

FILED
2012 DEC 31 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.413 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.


1. The name of the Limited Liability Company is:

Tequesta Urgent Care, LLC

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

Robert Rodriguez
One Main Street, Suite 102
Tequesta, FL 33469

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.


Robert Rodriguez, Registered Agent