

Division of Corporations

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Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : KLUGER, PERETZ, KAPLAN & BERLIN, P.A. (Ellen)

Account Number : I19990000171

Phone : (305) 379-9000

Fax Number : (305) 379-3428

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Old Cutler Family Medicine, P.L.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

JB
7-26-02

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**ARTICLES OF ORGANIZATION FOR
OLD CUTLER FAMILY MEDICINE, P.L.**

The undersigned, for the purpose of forming a limited liability company under F.S. Chapter 621, hereby makes, acknowledges and files the following Articles of Organization:

ARTICLE I - NAME

The name of the limited liability company shall be OLD CUTLER FAMILY MEDICINE, P.L. (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company shall be 7985 S.W. 136th Street, Miami, Florida 33156.

ARTICLE III - DURATION

The Company shall commence its existence as of the date these articles are filed by the Department of State. The Company's existence shall continue in perpetuity, unless the Company is earlier dissolved as provided in the Articles of Organization or the Operating Agreement of the Company.

ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is: Miami Center Registered Agents, LLC, 201 S. Biscayne Blvd., Suite 1700, Miami, Florida 33131.

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ARTICLE V - PURPOSE

The purpose of the Company shall be to provide medical services.

Having been named as registered agent and to accept service of process for the above-stated 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 of registered agent as provided for in Chapter 608, F.S.

MIAMI CENTER REGISTERED AGENTS, LLC

By: 

Jena E. Rissman, Vice President


Jena E. Rissman, Authorized Representative

(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.)

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