L02000024258

Florida Department of State

Division of Corporations Public Access System

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.

(((H02000199603 0)))

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)205-0383

From:

Account Name : POHL + SHORT, P.A.

Account Number : I20000000182 Phone : (407)647-7645

Fax Number : (407)647-7845

LIMITED LIABILITY COMPANY

Treasure Coast Injury and Wellness Centre, P.L.

QUZHWUY 3236

Certificate
Certificate
Certificate

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

Elactronic Filing Manus

Concerate Filles

Rublic Access Halp

BK

H02000199603 0

ARTICLES OF ORGANIZATION FOR
TREASURE COAST INJURY AND WELLNESS CENTRE, D.I.
A FLORIDA PROFESSIONAL LIMITED LIABILITY COMPAR

ARTICLE I NAME

The name of the Professional Limited Liability Company is TREASURE COAST INJURY AND WELLNESS CENTRE, P.L.

ARTICLE II PURPOSE

The purpose of the Professional Limited Liability Company is the practice of chiropractic and other types of medicine.

ARTICLE III ADDRESS

The mailing address and street address of the principal office of the Professional Limited Liability Company is 118 South U.S. Highway One, Vero Beach, Florida 32962.

ARTICLE IV DURATION

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

ARTICLE V MANAGEMENT

The Professional Limited Liability Company is to be managed by its managing member, and the name and address of the managing member is:

Dr. Shannon A. Griffin

118 South U.S. Highway One Vero Beach, Florida 32962

ARTICLE VI INITIAL REGISTERED OFFICE AND AGENT

The address of the initial Registered Office of the Professional Limited Liability Company is 118 South U.S. Highway One, Vero Beach, Florida 32962 and the initial Registered Agent at such address is Dr. Shannon A. Griffin.

H02000199603

IN WITNESS WHEREOF, the undersigned managing member affirms that, under penalties of perjury, the facts stated herein are true, and the undersigned member has executed these Articles of Organization this 16 day of 519440012 2002.

Dr. Shannon A. Griffin,

Managing Member

H02000199603 0

ACCEPTANCE OF APPOINTMENT BY INITIAL REGISTERED AGENT

THE UNDERSIGNED, an individual resident of the State of Florida, having been named in Article VI of the foregoing Articles of Organization as initial Registered Agent at the office designated therein, hereby accepts such appointment and agrees to act in such capacity. The undersigned hereby states that he is familiar with, and hereby accepts, the obligations set forth in Section 608.407, Florida Statutes, and the undersigned will further comply with any other provisions of law made applicable to him as Registered Agent of the Professional Limited Liability Company.

DATED this 14 day of Saptumes 2002.

Dr. Shannon A. Griffin, Registered Agent

H02000199603 0