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ECRETARY OF STATE LAHASSEE, FI OBLITA

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : BUTZEL LONG
Account Number : 105147001567
Phone : (561)368-2151
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LIMITED LIABILITY COMPANY

1825 TIFFANY AVENUE, LLC

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### ARTICLES OF ORGANIZATION

OF

## 1825 TIFFANY AVENUE, LLC

The undersigned acting as organizer of 1825 TIFFANY AVENUE, LLC, under the Florida Limited Liability Company Act, adopt the following Articles of Organization for said limited liability company.

The name of the limited liability company shall be 1825 TIFFANY AVENUE, "LLC").

### <u>ARTICLE II</u> **BUSINESS ADDRESS**

The street address of the place of business and the mailing address in this State of the LLC shall be 835 S.E. Osceola Street, Stuart, Florida 34994.

### <u>ARTICLE III</u> REGISTERED AGENT

The name and Florida street address of the registered agent is W. Edward Wengler, M.D. at 835 S.E. Osceola Street, Stuart, Florida 34994.

### <u>ARTICLE IV</u> MANAGEMENT

The LLC is to be managed by the Members. The names and addresses of the initial Members of the LLC are:

Rene Loyola, M.D. 835 S.E. Osceola Street Stuart, FL 34994

W. Edward Wengler, M.D. 835 S.E. Osceola Street Stuart, FL 34994

George Rittersbach, Jr., M.D. 835 S.E. Osceola Street Stuart, FL 34994

Prepared By: John J. Raymond, Jr. BUTZEL LONG, P.C. 1200 North Federal Highway, Suite 420 Boca Raton, FL 33432 Bar #194162

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IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed this <u>\( \) \( \) \( \) \( \) day of October, 2002.</u>

W. Edward Wengler, M.D. Authorized Representative

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# CERTIFICATE DESIGNATING PLACE OF BUSINESS WHOM PROCESS MAY BE SERVED

In compliance with Section 608.415 and 608.507, Florida Statutes, the following is submitted:

That, 1825 TIFFANY AVENUE, LLC, desiring to organize under the laws of the State of Florida, with its principal place of business at 835 S.E. Osceola Street, Stuart, Florida 34994, has named W. Edward Wengler, M.D., at 835 S.E. Osceola Street, Stuart, Florida 34994, as its agent to accept service of process within Florida.

### ACKNOWLEDGMENT:

Having been named to accept service of process for the above stated limited liability company, at the place designated in this Certificate, I hereby agree to act in this capacity and I further agree to comply with the provisions of all statutes relative to the proper performance of my duties.

W. Edward Wengler, M.D.

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