

# L02000033094

Florida Department of State  
Division of Corporations  
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**LIMITED LIABILITY COMPANY**

sleep-wake disorders center west coast division, llc

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION

OF

SLEEP-WAKE DISORDERS CENTER WEST COAST DIVISION, L.L.C.

The undersigned two or more persons hereby form a limited liability company and adopt as the Articles of Organization of such limited liability company the following:

I. THE NAME OF THE LIMITED LIABILITY COMPANY:

SLEEP-WAKE DISORDERS CENTER WEST COAST DIVISION LIMITED LIABILITY COMPANY.

II. THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

4738 S.W. 74th Avenue, Miami, Florida 33155

III. THE PERIOD OF ITS DURATION:

This Limited Liability Company shall exist for a period of Ninety Nine Years from the date of filing these Articles of Organization with the Florida Department of State, Division of Corporations, unless sooner dissolved as provided by statute.

IV. THE NAME AND ADDRESS OF THE REGISTERED AGENT IN FLORIDA:

Frank Gomez  
4738 Southwest 74<sup>th</sup> Avenue  
Miami, Florida, 33155

V. MANAGEMENT:

The Limited Liability Company is to be managed by the a board of managers and the titles and addresses of the managers are:

1. Frank Gomez, Manager - 4738 Southwest 74<sup>th</sup> Avenue, Miami, Florida 33155
2. Sleep-Wake Disorders Center of South Florida, Inc. 7325 Southwest 63<sup>rd</sup> Avenue, Suite 203, Miami, Florida 33143

VI. MEMBERS:

The Limited Liability Company shall consist of the following Members, who shall own an undivided interest in the Company as follows:

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1. Frank Gomez, - 50.00% per cent
2. Sleep-Wake Disorder Center of South Florida, Inc., - 50.00% per cent

VI. THE RIGHT, IF GIVEN, OF THE MEMBERS TO ADMIT ADDITIONAL MEMBERS, AND THE TERMS AND CONDITIONS OF THE ADMISSION.

Additional members may be admitted only at such times and on such terms and conditions as Members may unanimously agree.

VII. THE RIGHT, IF GIVEN, OF THE REMAINING MEMBERS OF THE LIMITED LIABILITY COMPANY TO CONTINUE THE BUSINESS ON THE DEATH, RETIREMENT, RESIGNATION, EXPULSION, BANKRUPTCY OR DISSOLUTION OF A MEMBER OR OCCURRENCE OF ANY OTHER EVENT WHICH TERMINATES THE CONTINUED MEMBERSHIP OF A MEMBER IN THE LIMITED LIABILITY COMPANY.

The remaining members of the Company may continue the business upon the termination of membership of a Member in the Company upon unanimous agreement.

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IN WITNESS WHEREOF, THE PARTIES HERETO HAVE EXECUTED THESE ARTICLES  
OF ORGANIZATION.

Frank Gomez  
Frank Gomez

BEFORE ME personally appeared Frank Gomez  
who to me known to be the persons who executed the  
foregoing articles of organization.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this  
22nd day of November, 2002.

Danae M. Ramirez  
NOTARY PUBLIC - State of Florida

Personally known ☒ OR Produced Identification ☐  
Type of Identification Produced \_\_\_\_\_

IN WITNESS WHEREOF, THE PARTIES HERETO HAVE EXECUTED THESE ARTICLES  
OF ORGANIZATION.

Sleep Wake Disorders Center of South Florida, Inc.

Robert B. Schader President  
Dr. Schader

BEFORE ME personally appeared Robert B. Schader  
who to me known to be the persons who executed the  
foregoing articles of organization.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this  
9th day of December, 2002.

BARBARA E. LAVALLEY  
NOTARY PUBLIC - STATE OF FLORIDA  
COMMISSION # 00000000  
EXPIRES 12/31/04  
BORN 01/11/54

Barbara LaValley  
NOTARY PUBLIC - State of Florida

Personally known ☒ OR Produced Identification ☐  
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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited liability company is Sleep-Wake Disorders Center West Coast Division LIMITED LIABILITY COMPANY.
2. The name and address of the registered agent and office is:

Frank Gomez  
4738 Southwest 74<sup>th</sup> Avenue  
Miami, Florida 33155

Having been named as registered agent and to accept service 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.

  
Frank Gomez

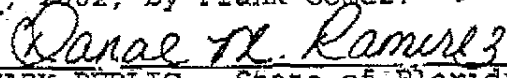
11/22/02  
Date

STATE OF FLORIDA )  
COUNTY OF DADE ) SS



Sworn to (or affirmed) and subscribed before me this

22nd day of November, 2002, by Frank Gomez.

  
NOTARY PUBLIC - State of Florida

Personally known                      OR Produced Identification                     

Type of Identification Produced                     

Prepared By: Frank Perez-Niam, Esquire, Florida Bar I.D. #0768911  
4100 Red Road, Miami, FL 33155

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