

# H03000000326

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.**

(((H030000002336 3)))

**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 : EAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

FILED  
03 JAN -3 AM 8:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY COMPANY**

**SLEEP-WAKE DISORDERS CENTER OF SOUTH FLORIDA INTERNA**

1-6-03 *alist*

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLE OF ORGANIZATION  
OF  
SLEEP-WAKE DISORDERS CENTER OF SOUTH FLORIDA  
INTERNATIONAL DIVISION, L.L.C.

ARTICLE I:  
NAME

The name of the limited liability company is:

SLEEP-WAKE DISORDERS CENTER OF SOUTH FLORIDA  
INTERNATIONAL DIVISION, L.L.C.

FILED  
03 JAN -3 AM 8:36  
SECONDARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II:  
OFFICE ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is: 12251 Taft Street Suite 403, Pembroke Pines, Florida 33026.

ARTICLE III  
DURATION

This Limited Liability Company shall have a perpetual existence commencing on the Date of Filing.

ARTICLE IV  
PURPOSE

This Limited Liability Company may engage in any activity of business permitted under the laws of the United States and the State of Florida.

ARTICLE VI  
MANAGEMENT

- ( X ) The Limited Liability Company is to be managed by the member(s) and the name(s) and address(es) of such member(s) of managing member(s) is(are):

Carlos Jaramillo  
12251 Taft Street Suite 403  
Pembroke Pines, Fl 33026

Alba Z. Montoya  
6855 Abbott Ave. Apt. 802  
Miami Beach, Fl 33141

Diana Jaramillo  
6855 Abbott Ave. Apt. 802  
Miami Beach, Fl 33141

FILED  
03 JAN -3 AM 8:36  
SECRETARY OF  
TALLAHASSEE, FLORIDA

ARTICLE VII  
DATE

- ( X ) The effective date of commencement of the Limited Liability Company is January 3<sup>rd</sup> of the year 2003.

In accordance with the 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.

  
Carlos Jaramillo

ARTICLE V:  
REGISTERED AGENT

The name and Florida Street address of Sleep-Wake Disorders Center of South Florida International Division, L.L.C. registered agent is:

Carlos Jaramillo  
12251 Taft Street Suite 403  
Pembroke Pines, Florida 33026

FILED  
03 JAN -3 AM 8:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having been named as registered agent and accept service of process for the above stated Limited Liability Company at the place designated in this certificate, I hereby accept the appointments 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 as provided for in Chapter 608, F.S.

  
Carlos Jaramillo  
Registered Agent