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(Re	equestor's Name)	
(Ac	dress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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February 6, 2003

Florida Department of State Registration Section Division of Corporations PO Box 6327 Tallahassee FL 32314



Please find enclosed the Articles of Organization for my limited liability company and filing fees.

My wife's company, OncoCare.US LC, is involved in the business of providing training and consultation services in chemotherapy treatment plans to licensed medical professionals.

I, her husband, am listed as the Registered Agent.

In addition to the filing fee and Registered Agent fee, please provided a Certified Copy and a Certificate of Status. A check totaling \$160 is enclosed.

Thank you,

Russell L Meyer

5025 Southampton Circle

Tampa FL 33647

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is: OncoCare.US LC

## **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: Maria Julia Meyer, 5025 Southampton Circle, Tampa FL 33647

ARTICLE III - R	egistered Agent, R	Registered Office, & Registered Age	ent's Signal	ure	دت	
The name and the Florida street address of the registered agent are:		LAHA		833	二	
Russell Meyer  Name  5025 Southampton Circle		SSE	7) 	5	TII:	
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Florida street address (P.O. Box NOT acceptable)			577	<u>F</u>		
	Tampa	FL 33647	_			
, -,		City, State, and Zip		-	,	

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 as provided for in Chapter 608, F.S.

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(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.)

Maria Julia Meyer

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)