

L03000023075

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05/19/03--01081--011 **78.75

05/26/03--01040--010 **46.25

03 JUN 24 AM 8:30

FILED

money

TAX _____
PR _____
46.25
_____ CE _____
_____ DUE _____
REFUND _____

**SOUTH BROWARD CARDIOLOGY CONSULTANTS, P.A.
3335 NORTH UNIVERSITY DRIVE, SUITE 8
DAVIE, FLORIDA 33024**

June 4, 2003

Florida Department of State
Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**Re: Physicians Resource Services, LLC
Document No. W03000014819**

Enclosed please find Articles of Organization of Physicians Resource Center, LLC, along with a check in the amount of \$46.25. I had previously submitted Articles of Organization for Physicians Resource Services, LLC, along with a check in the amount of \$78.75 instead of the required fee of \$125.00. Please do not file the Articles of Organization previously submitted and instead please file the enclosed Articles of Organization of Physicians Resource Center, LLC and apply the previously paid amount of \$78.75 to the required fee for this filing. I have also enclosed a copy of the rejection letter from your office for your reference.

Please call me at (954) 981-3331, Ext. 170 if you have any questions or require additional information.

Sincerely,



Judah Friedman
Chief Executive Officer

JF/gf
Enclosures



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 23, 2003

PHYSICIANS RESOURCE SERVICES, LLC
3335 NORTH UNIVERSITY DRIVE, SUITE 8
DAVIE, FL 33024

SUBJECT: PHYSICIANS RESOURCE SERVICES, LLC
Ref. Number: W03000014819

We have received your document for PHYSICIANS RESOURCE SERVICES, LLC and check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$46.25. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 103A00032547

**ARTICLES OF ORGANIZATION
OF
PHYSICIANS RESOURCE CENTER, LLC**

**ARTICLE I
Name**

The name of the Limited Liability Company is PHYSICIANS RESOURCE CENTER, LLC (the "Company").

**ARTICLE II
Address**

The mailing address and street address of the principal office of the Company is 3335 North University Drive, Suite 8, Davie, Florida 33024.

**ARTICLE III
Registered Agent**

The name of the Company's registered agent in the State of Florida is Tracie Santana and the address of the Company's registered office is 3335 North University Drive, Davie, Florida 33024..

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TALLAHASSEE, FLORIDA

**ARTICLE IV
Duration**

The period of duration for the Company shall be perpetual.

**ARTICLE V
Management**

The Company is to be managed by the members and the name and address of the initial managing member is:

South Broward Cardiology Consultants, P.A.
1150 North 35th Avenue, Suite 610
Hollywood, Florida 33021

ARTICLE VI
Admission of Additional Members

Members shall have the right to admit additional members as provided by the Florida Limited Liability Company Act by a vote of a majority-in-interest of the members.

ARTICLE VII
Members' Rights to Continue Business

The death, retirement, resignation, expulsion, dissolution, bankruptcy, dissociation or withdrawal of any member, or the occurrence of any other event that terminates the continued membership of any member shall not cause the Company to be dissolved or its affairs to be wound-up, and upon the occurrence of any such event, the Company shall be continued without dissolution and without any affirmative action or requirement on the part of the members.

MEMBER:

SOUTH BROWARD CARDIOLOGY
CONSULTANTS, P.A.

By: 
Judah Friedman, Chief Executive Officer

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**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.407 OR 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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: PHYSICIANS RESOURCE CENTER, LLC
2. The name and address of the registered agent and office is: Tracie Santana, 3335 North University Drive, Davie, Florida 33024

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.


Tracie Santana

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