

# L030000 29319

(Requestor's Name)

From: JAMES A. FARRELL, ESQ. (561) 835-8500  
SHUTTS & BOWEN LLP  
ONE CLEARLAKE CENTRE  
250 AUSTRALIAN AVENUE S Suite 500  
WEST PALM BEACH, FL, 33401

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

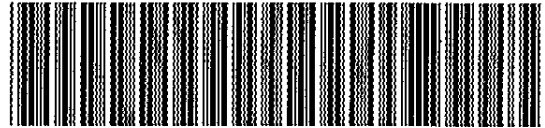
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

**PLANTATION URGENT CARE CENTER, LLC**

**ARTICLE II - Address**

The mailing address and the street address of the principal office of the Limited Liability Company is:

Mailing and Street  
Address:

901 S. State Road 7  
Plantation, FL 33324  
Attn: Chief Executive Officer

**ARTICLE III - Registered Agent and Office**

The name and the Florida street address of the initial registered agent of the Limited Liability Company are:

Registered Agent:

CORPORATION COMPANY OF MIAMI

Street Address

201 South Biscayne Blvd.  
1500 Miami Center  
Miami, Florida 33131

**ARTICLE IV - Management**

The Limited Liability Company is to be managed by one or more Managers and is, therefore, a manager-managed company.

Date: August 4, 2003

Plantation Urgent Care Center, LLC,  
a Florida limited liability company

By: \_\_\_\_\_

James A. Farrell as authorized agent for  
Jean Charlot, M.D., Manager

(In accordance with section 608.408(3), Florida Statutes,  
the execution of this affidavit constitutes an affirmation under  
the penalties of perjury that the facts stated herein are true.)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

## REGISTERED AGENT ACCEPTANCE

Having been named to accept service of process for the above stated limited liability company at the address designated in this certificate pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete discharge of its duties.

CORPORATION COMPANY OF MIAMI  
REGISTERED AGENT

By: \_\_\_\_\_

Name: Arthur J. Menor

Title: Vice President

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### 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)