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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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Office Use Only

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	10/10/03	
SUBJECT: Bruce Alan Barniville, LLC	;	
	nited Liability Company)	. - .
The enclosed Articles of Organization and for	ee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Andrew E. Pastor, Esq.	• .	-
(Name of Person)		
Andrew E. Pastor, P.A.		
(Firm/Company)		
11380 Prosperity Farms Road, Suite 10 (Address))1 	
Palm Beach Gardens, FL 33410		03 VI
(City/State and Zip Code)		IVISION C
For further information concerning this matt	er, please call:	TARY OF STATE OF CORPORATION
Andrew E. Pastor	at (561) 624-4900	STATE RATIO
(Name of Person)	(Area Code & Daytime Telephone Number)	NS
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	

Tallahassee, Florida 32399

Tallahassee, Florida 32314

Enclosed check#1710 For \$130.00 Fing Re \$1.

Designation \$2

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bruce Alan Barniville, M.D., LLC

ARTICLE II - Address:

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

Principal	Office	Address:	

Mail	linσ	Ad	ldre	66.
V L	11112	-		

Bruce Alan Barniville	Bruce Alan Bamiville
675 West Indiantown Road	675 West Indiantown Road
Jupiter, FL 33458	Jupiter, FL 33458

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Andrew E. Pastor, Esq.

Name

11380 Prosperity Farms Road, Suite 101

Florida street address (P.O. Box NOT acceptable)

Palm Beach Gardens

т 33410

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

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Bruce Alan Barniville	•
•	675 West Indiantown Road	
	Jupiter, FL 33458	
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(Use attachment if necessary)		

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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.)

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)

Page 2 of 2