

LD3000041144

(Requestor's Name)

Arthur Carl Haspel, D.P.M.
1814 NE Miami Gardens Dr.
PMB 701
N. Miami Bch., FL 33179

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

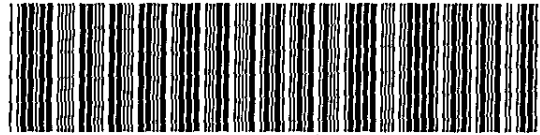
(Business Entity Name)

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LD3-41144
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 13, 2003

ARTHUR CARL HASPEL
1814 NE MIAMI GARDENS DR., PMB 701
N. MIAMI BEACH, FL 33179

SUBJECT: THE FOOT DOCTORS, LLC
Ref. Number: W03000029541

We have received your document for THE FOOT DOCTORS, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles need to be titled articles of organization.,

Limited Liability Companies are not corporations. Limited Liability Companies are unique business entities with special characteristics and attributes formed under Chapter 608, Florida Statutes. Corporations, on the other hand, are formed under Chapter 607, Florida Statutes, and possess other distinctive traits and characteristics. Consequently, limited liability company documents cannot contain any references/terms which may implicate the entity is a corporation. Please delete any references to the term "corporation" or the like from your document.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 603A00055800

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
THE FOOT DOCTORS, LLC**

In compliance with the requirements of the Laws of the State of Florida, the undersigned hereby associate themselves together for the purpose of forming an organization, not for profit and do hereby certify:

ARTICLE I

The name of the organization is **THE FOOT DOCTORS LLC** hereinafter called the "Doctors"

ARTICLE II

The street address of the Registered Office of the Organization is 7144 Nob Hill Road, Tamarac, FL, 33321 and the Registered Agent **ARTHUR HASPEL**.

**ARTICLE III
PURPOSE**

The purpose of the "Doctors" is to establish locations, office procedures to diagnosis, therapeutically treat and perform therapy including surgery for individuals with afflictions of the lower extremity, and to maintain high standards for the diagnosis and treatment of those individuals afflicted with ailments.

**ARTICLE IV
POWERS**

The Foot Doctors, shall have all the powers and duties reasonably necessary to operate and perform any and all functions necessary to establish, maintain "Doctors" including, but not limited to those functions normally performed in the conduction of business.

**ARTICLE V
ORGANIZERS
AND SHAREHOLDERS**

For the purpose of forming "Doctors", the following shall serve as the initial organizer, and shall upon the formation of "Doctors" elect a new Board of Directors to serve for one year terms and then hold annual elections among the shareholders. Each shareholder shall be a duly licensed Podiatric Physician and Surgeon, in the State of Florida at the time of their initial election, and may be re-elected in subsequent years.

The Directors named in these Articles shall serve until the first election of Directors, and the issuance of common stock.

The name and address of the first Board of Directors who shall hold office until their successors are elected and have qualified, is as follows:

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HASPEL FLORIDA

NAME:
Arthur Carl Haspel, DPM

ADDRESS:
7144 Nob Hill Road
Tamarac, FL 33321

Brian Finke, DPM

7144 Nob Hill Road
Tamarac, FL 33321

ARTICLE VI DURATION

The organization shall exist perpetually.

ARTICLE VII AMENDMENTS

Ammendments to these Articles may be proposed upon a vote of the majority of the shareholders adopting a resolution setting forth the proposed amendment to these Articles, submitted to a meeting of shareholders, called for that purpose.

ARTICLE VIII SUBSCRIBERS

The name and street address of the Subscribers to these Articles of Organization is the same as listed in Article V hereof.

ARTICLE IX OFFICERS

The Board of Directors shall elect the President, Vice Presdeint, Secretary, Treasurer,

The name and address of the officers who shall serve until his successor is designated by the Board of Directors are as follows:

President:	ARTHUR HASPEL, DPM	7144 NOB HILL ROAD TAMARAC, FL 33321
Vice President:	ARTHUR HASPEL, DPM	7144 NOB HILL ROAD TAMARAC, FL 33321
Secretary-Treasurer:	BRIAN FINKE, DPM	7144 NOB HILL ROAD TAMARAC, FL 33321

ARTICLE X

The original By-laws of "DOCTORS" shall be adopted by a majority vote of the DIRECTORS. Thereafter, the By-laws of "DOCTORS" may be amended, altered at a regular or special meeting of the members by a vote of a majority of a quorum of stock holders present in person.

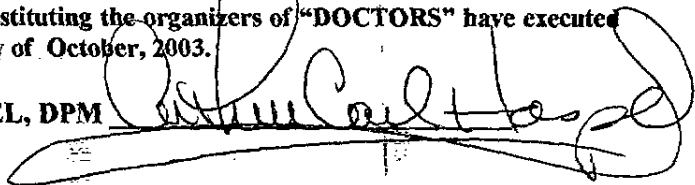
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IN WITNESS WHEREOF, for the purpose of forming this organization under the Laws of the State of Florida, we the undersigned, constituting the organizers of "DOCTORS" have executed these Articles of Organization this 21 day of October, 2003.

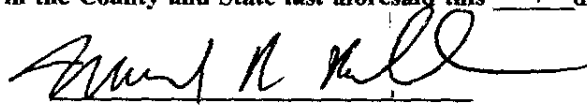
ARTHUR HASPEL, DPM
STATE OF FLORIDA)
: SS:
COUNTY OF)



I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to make acknowledgements, personally appeared, ARTHUR HASPEL, D.P.M. known to me to be the persons described in and who executed the foregoing instrument and they acknowledged before as that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 21 day of October 2003

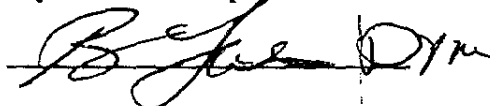



Notary Public
State of Florida at Large

NOTARY SEAL

My Commission Expires: 2-29-2004

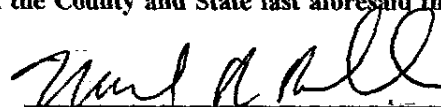
BRIAN FINKE, DPM
STATE OF FLORIDA)
: SS:
COUNTY OF)


Notary Public
State of Florida at Large

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to make acknowledgements, personally appeared, BRIAN FINKE, DPM known to me to be the persons described in and who executed the foregoing instrument and they acknowledged before as that they executed the same.

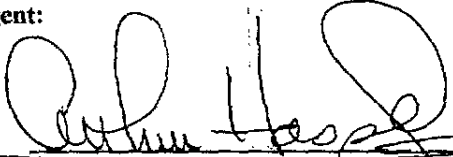
WITNESS my hand and official seal in the County and State last aforesaid this 21 day of October 2003



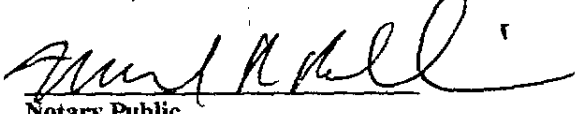

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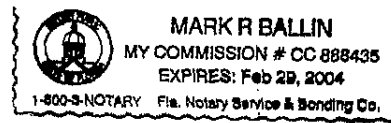
I hereby accept my designation as registered agent:


ARTHUR HASPEL, DPM

Sworn to and subscribed before me this 21 day of October, 2003


Notary Public
State of Florida at Large

My commission expires on:



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