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# LIMITED LIABILITY COMPANY

## manuel iriondo m.d. l.l.c.

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# ARTICLES OF ORGANIZATION OF MANUEL IRIONDO M.D. L.L.C.

The Undersigned Member, for the purpose of forming a Limited Liability Company under Chapter 608 of the Florida Status hereby adopt the following Articles of Organization.

# **ARTICLE**

The name of the limited liability company shall be:

Manuel Iriondo M.D.L.L.C.

#### ARTICLE II

The mailing address and the street address of the principal office of the limited liability company shall be;

901 Ponce de Leon Blvd. #501 Coral Gables, Fl. 33134

### ARTICLE III

The period of duration of the limited liability company shall be perpetual.

#### ARTICLE IV

The limited liability company is to be managed by the members and the name and address of the managing member is:

Manuel Irlondo 375 Harbor Drive. Key Biscayne, Fl. 33149

Manuel Iriondo

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

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#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of Section 608.415  $\pm$  608.507, Florida Statutes, the UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: Manuel Iriando M.D. L.L.C
- 2. The name and the Florida street address of the registered agent is:

Andres J. Iriondo 901 Ponce de Leon Bivd, Suite 501 Coral Gables, Fl. 33134

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the certificate, I hereby accept 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 am familiar with and accept the obligations of my position as registered agent,