

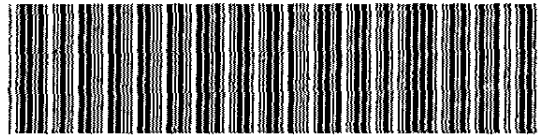
L04000060758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



100040115721

08/16/04--01040--004 **125.00

☐ PICK UP ☐ WAIT ☐ MAIL

- Wafa A. Abdulrazzag, OD
- 1600 NW 110th Ave. Apt. #161
- Plantation, FL 33322

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

RECEIVED
DIVISION OF
04 AUG 16 AM 11:31

Articles of Organization for Florida Limited Liability Company

Article I – Name:

The name of the Limited Liability Company is: Dr. Wafa A. Abdulrazzaq, LLC.

Article II – Address:

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

1600 NW 110th Ave
Apt #161
Plantation, FL 33322

Article III – Registered Agent, Registered Office, & Registered Agent's Signature:

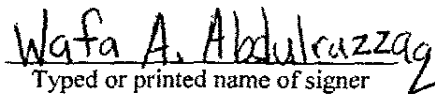
The name and the Florida street address of the registered agent are:

Wafa A. Abdulrazzaq, O.D.
1600 NW 110th Ave
Apt# 161
Plantation, FL 33322

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

(In accordance with section 608.408(3), Florida Statute,
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 signer

04 AUG 16 AM 11:31
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Articles of Organization for Florida Limited Liability Company

Article I – Name:

The name of the Limited Liability Company is: Dr. Wafa A. Abdulrazzaq, LLC.

Article II – Address:

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

1600 NW 110th Ave
Apt #161
Plantation, FL 33322

Article III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Wafa A. Abdulrazzaq, O.D.
1600 NW 110th Ave
Apt# 161
Plantation, FL 33322

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

(In accordance with section 608.408(3), Florida Statute,
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 signer

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 AUG 16 AM 11:31