L04000081459

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only

M



300041486383

11/01/04--01057--002 **135.00

04 NOV 10 PM 3: 28

(ep

ROBERT J. GORMAN, P.A.

A Professional Association 1209 Delaware Avenue Fort Pierce, Florida 34950-4049 (772)465-5311 (772)465-5722 Fax

Robert J. Gorman, Esquire ===================================	(772)465-5722 Fax		Box 113 (SHC)
☑ U.S. Mail ☐ Fax Transmission @:		□ Overnight Delivery	□ Hand Delivery

October 27, 2004

Secretary of State - Division of Corporations Limited Liability Filing Post Office Box 6327 Tallahassee, Florida 32314-6327

RE: OCEANSIDE LUXURY CARE, L.L.C.

W04-40779

Gentlemen:

Enclosed herewith please find Article of Organization of Oceanside Luxury Care, L.L.C., which is being forwarded to you for filing. You will additionally find this firm's check in the amount of \$135.00 which represents the filing fee of \$100.00, certified copy fee of \$30.00, and certificate of status fee of \$5.00.

When the same has been filed, kindly provide the undersigned with a certified copy as well as a certificate of status.

Thank you for your attention to this matter.

Very truly yours,

Robert J. Gorman

RJG/cat

Enclosures

CAPITAL CONNECTION, INC.

	1-800-342-8062 • Fax (850) 222-1222	ARASSI PA
Doenside L	uxury Care, Sxc	OH NOVIO AN II: OI OH NOVIO AN II: OI OH NOVIO AN II: OI TALLAH ASSES, FLORIDA TALLAH ASSES, FLORIDA
		Art of Inc. File
Signature		Corp Record Search Officer Search Fictitious Search Fictitious Owner Search
Requested by: Name	11 10 04 9:25 Date Time	Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval
Walk-In	Will Pick Up	Courier



Secretary of State



November 5, 2004

ROBERT J. GORMAN ROBERT J. GORMAN, P.A. 1209 DELAWARE AVENUE FORT PIERCE, FL 34950-4049

SUBJECT: OCEANSIDE LUXURY CARE, L.L.C.

Ref. Number: W04000040779

We have received your document for OCEANSIDE LUXURY CARE, L.L.C. and check(s) totaling \$135.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return 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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 804A00063634

Articles of Organization of OCEANSIDE LUXURY CARE, L.L.C.

ALCONO PASSES

The undersigned hereby enter into these Articles of Organization of a Limited Liability

Company, by and between Hayes Medical Associates, P.A., and pursuant to Chapter 608, Florida

Statutes, hereby organize OCEANSIDE LUXURY CARE, L.L.C., and further agree:

ARTICLE I

The name of the Limited Liability Company is OCEANSIDE LUXURY CARE, L.L.C.

ARTICLE II

These Articles of Organization shall be effective upon filing with the Florida Department of State.

ARTICLE III

The Limited Liability Company is organized for the purposes as follows:

- (a) To engage generally in the practice of medicine,
 manage and operate medical practices and all related
 activities within the State of Florida, for all persons,
 entities, governmental bodies and corporations for which
 the corporation shall have qualified;
- (b) To deal generally with members of the public to provide medical services, and related activities;
- (c) To perform fully any agreement with any member of the Limited Liability Company;
- (d) To have all of the powers of Limited Liability

 Companies generally organized and existing under Chapter

608, Florida Statutes or such powers as shall hereafter be conferred upon such companies by the laws of the State of Florida.

ARTICLE IV

The Limited Liability Company initially shall have more than one place of business but its registered office shall be 1209 Delaware Avenue, Fort Pierce, Florida 34957. It's initial registered agent shall be Robert J. Gorman, Esquire at 1209 Delaware Avenue, Fort Pierce, FL 34950. The principal and mailing address is 10873 S. Ocean Drive, Jensen Beach, FL 34957.

ARTICLE V

The total amount of cash and agreed upon value of property other than cash contributed to the Company is as follows:

Cash	\$
Receivables	\$
Agreed Value of Property	\$
(Property consists of	

Additional contributions are not contemplated or required.

ARTICLE VI

Additional members may be admitted upon such terms, conditions, agreements and understandings as shall be agreed upon by the members including contributions to capital, future contributions of capital. No new member whether by acquisition of a capital position or acquisition in whole or in part of another member's interest in the Company shall be allowed except upon the mutual consent and agreement of each member to the proposed transfer or assignment or entry which consent shall be in writing; provided, however, that even lacking such

unanimous written consent, such transferee may, without having any participation or right of participation in the management and affairs of the Company or to become a member with full rights, shall be entitled to the share of profits or other income or return of contributions to which such personal would otherwise be entitled based upon the proportionate share of capital of such person.

ARTICLE VII

Upon the death, retirement, resignation, bankruptcy, expulsion or dissolution of a member which is a corporate association or trust, or the occurrence of any other event which terminates the continued membership of a member in the Company, the Company shall continue business unless a majority in interest of all of the remaining members determine, in writing, to terminate the Company, in which event Articles of Dissolution shall be prepared and filed.

ARTICLE VIII

The Company shall be managed by a manager or managers which shall be selected by the members on an annual basis and which manager or managers shall continue in such capacity until their successor(s) are duly elected and qualified and assume their duties. The initial manager who shall serve until the first annual meeting of or until his successor is elected and qualified is: Carolyn W. Hayes, RN MBA at 10873 S. Ocean Drive, Jensen Beach, FL 34957.

IN WITNESS WHEREOF the undersig	gned has set his hand and seal this day of	
October, 2004.		
	(Member) HAYES MEDICAL ASSOCIATES, P.A. By:	
STATE OF FLORIDA	COUNTY OF ST. LUCI	
BEFORE ME, the undersigned authority, personally appeared Robert J. Gorman, Esquire as agent for Hayes Medical Associates, P.A., who is \Box personally known to me or has \Box produced a Driver's license as identification. WITNESS my hand and official seal, in the County and State last aforesaid this day of October, 2004.		
My Commission Expires:	Notary Public	

ACKNOWLEDGMENT AND ACCEPTANCE OF REGISTERED AGENT

The undersigned, having been named as the Registered Agent for OCEANSIDE LUXURY CARE, L.L.C., and as agent to accept service of process of such limited liability company, at the place designated in Article IV, does hereby accept to act in this capacity, and agrees to comply with the provisions of the Limited Liability Company Act, Chapter 608 of the Florida Statutes.

Robert J. Gorman (Registered Agent)