

L05000007683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only



900044962889

FILED

05 JAN 26 AM 8:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01/26/05--01001--002 **130.00

FILED

05 JAN 26 AM 8:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

05 JAN 25 PM 3:11

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Requester's Name	
STUART E. GOLDBERG	
ATTORNEY AT LAW	
P.O. BOX 12458	
TALLAHASSEE, FL 32317-2458	
City/State/Zip	Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Katopodis & Cox Properties LLC
 (Corporation Name) (Document #)

2. _____
 (Corporation Name) (Document #)

3. _____
 (Corporation Name) (Document #)

4. _____
 (Corporation Name) (Document #)

- | | | |
|-----------------------------------|---|---|
| ☐ Walk in | ☐ Pick up time _____ | ☐ Certified Copy |
| ☐ Mail out | ☐ Will wait | ☒ Certificate of Status |
| | ☐ Photocopy | |

NEW FILINGS

- ☐ Profit
- ☒ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

FILED
 05 JAN 25 AM 8:08
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
KATOPODIS & COX PROPERTIES, LLC

FILED
05 JAN 25 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, under the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida, do set forth the following:

Article I. Name

The name of this limited liability company is Katopodis & Cox Properties, LLC ("the Company").

Article II. Duration

Unless earlier terminated under the law or the Operating Agreement, the duration of the Company shall be perpetual.

Article III. Address of Principal Office

The street address of the principal office and the mailing address of the Company is 3842 E. Miller's Bridge Road, Tallahassee, Florida 32312.

Article IV. Initial Registered Agent and Address

The name and street address of the initial registered agent of the Company is Stuart E. Goldberg, Esq., 2039 Centre Pointe Boulevard, Suite 201, Tallahassee, Florida 32308.

Article V. Admission of Additional Members

No additional members shall be admitted to the Company except with the unanimous written consent of all the members of the Company and upon such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the Operating Agreement of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or to become a member unless all the other members of the Company, other than the member proposing to dispose of his or her interest, approve of the proposed transfer by unanimous written consent.

Article VI. Members' Rights to Continue Business

Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or upon the occurrence of any other event that terminates the continued membership of a member in the Company, the remaining members of the Company shall have the right to continue the business of the Company, provided that all remaining members consent to the continuation and there is at least one remaining member.

Article VII. Management

Management of the Company shall be reserved to the members. The names and addresses of the managing members of the Company are:

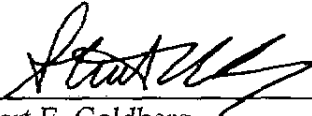
John N. Katopodis, M.D.
3842 E. Miller's Bridge Road
Tallahassee, Florida 32312

Marilyn M. Cox, M.D.
3842 E. Miller's Bridge Road
Tallahassee, Florida 32312

Article VIII. Indemnification

Except as expressly provided in the Operating Agreement, the Company shall indemnify any member, manager, or former member or manager to the full extent possible under the law.

Signed at Tallahassee, Florida, on the 25th day of January, 2005.



Stuart E. Goldberg
Authorized Representative

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 of the Florida Statutes (2003), the undersigned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is Katopodis & Cox Properties, LLC.
2. The name and address of the registered agent and office is Stuart E. Goldberg, Esq., 2039 Centre Pointe Boulevard, Suite 201, Tallahassee, Florida 32308.

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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signed at Tallahassee, Leon County, Florida, on the 25 day of January, 2005.



Stuart E. Goldberg