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TERRY MCDAVID

ATTORNEY AT LAW 178 SE HERNANDO AVENUE LAKE CITY, FLORIDA 32025

MAILING ADDRESS POST OFFICE BOX 1328 LAKE CITY, FLORIDA 32056-1328

February 8, 2005

TELEPHONE: 386-752-1896 FAX: 386-752-8905

Florida Department of State Corporation Division Post Office Box 6327 Tallahassee, FL 32314

Gentlemen:

I am enclosing an original and a copy of the Articles of Organization with respect to the following companies:

- 1. Phoenix Plaza, LLC
- 2. A & B Management, LLC
- 3. Kappele Medical, LLC
- 4. James Conner Custom Woodworks, LLC

Please file the originals and certify the copies to be returned to me. A check in the amount of \$620.00 is enclosed in payment of the filing fee, resident agent fee and the certified copy.

Sincerely yours,

Terry McDavid

TM/db

Enclosures

ARTICLES OF ORGANIZATION FOR KAPPELE MEDICAL, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is: Kappele Medical, LLC.

ARTICLE II - Address:

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

3624 NW Brown Road lake City, FL 32055

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ARTICLE III - Duration:

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The company's existence shall be perpetual, unless the company is earlier dissolved as provided in these articles of organization.

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

A & B Management, LLC 3624 NW Brown Road Lake City, FL 32055

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

No additional members shall be admitted to the company except with the unanimous written consent of all the members of the

company and on 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 regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or 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.

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ARTICLE VI - Members Rights to Continue Business:

The right, if given of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be:

The company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by the consent of all the remaining members, provided there is at least one remaining member.

A & B MANAGEMENT, LLC

By: While Managing Member

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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF \$608.415 OR 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: Kappele Medical, LLC.
- 2. The name and the Florida street address of the registered agent are:

Alice Nash 3624 NW Brown Road Lake City, FL 32055

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.

Alice Nash