

LO5000064569
FILE

2005 JUN 22 P 3:05

SECRETARY OF STATE
TALLAHASSEE FLORIDA

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

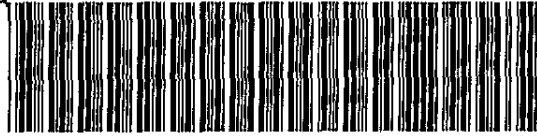
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Special Instructions to Filing Officer:

W05-29293

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED

2005 JUN 22 P 3:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 14, 2005

ADRIANA ESTHER CABON
2145 S. TONNE DRIVE #102
ARLINGTON HEIGHTS, IL 60005

SUBJECT: ADRIANA E. CARGON MD, LLC
Ref. Number: W05000029293

We have received your document for ADRIANA E. CARGON MD, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 005A00041227

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

FILED

SUBJECT: Adriana E. Carbon MD, LLC
(Name of Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adriana Esther Carbon

(Name of Person)

Adriana E. Carbon MD, LLC

(Firm/Company)

2145 S Tonne Drive # 102

(Address)

Arlington Heights, IL 60005

(City/State and Zip Code)

For further information concerning this matter, please call:

Lovely Leynes

(Name of Person)

at (630) 776-3297

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

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Adriana E. Carbon MD, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

781 CYPRESS VILLAGE BLVD
SUNNY, FLORIDA 33573

2145 S. Tonne Drive # 102
Arlington Heights, IL 60005

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

ADRIANA ESTHER CARBON
Name

781 CYPRESS VILLAGE BLVD
Florida street address (P.O. Box NOT acceptable)

SUNNY, FL FL 33573
City, State, and Zip

Having been named as registered agent and to accept service of process for the ab- 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 in Chapter 607, F.S.

[Signature]
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

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Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGRM

Adriana Esther Carbon
2145 S. Tonne Drive # 102
Arlington Heights, IL 60005

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

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

Adriana Esther Carbon

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)