

Jul. 7. 2005 10:45AM

No. 7472 P. 1/5

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From:  
Account Name : BLANCHARD, MERRIAM, ADEL & KIRKLAND, P.A.  
Account Number : 120000000117  
Phone : (352) 732-7218  
Fax Number : (352) 732-0017

**LIMITED LIABILITY COMPANY**

Stuart Cardiovascular Anesthesia Associates, PLLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
OF  
STUART CARDIOVASCULAR ANESTHESIA ASSOCIATES, PLLC.**

The undersigned hereby executes and acknowledges these Articles of Organization for the purpose of forming a limited liability company in accordance with the laws of the State of Florida.

**ARTICLE I  
NAME**

The name of this company is **STUART CARDIOVASCULAR ANESTHESIA ASSOCIATES, PLLC.**

**ARTICLE II  
PERIOD OF DURATION**

This company shall commence as of the date these Articles of Organization are filed with the Department of State of the State of Florida and shall exist perpetually thereafter unless this company is dissolved pursuant to the terms of the operating agreement for this company or by operation of law.

**ARTICLE III  
BUSINESS, OBJECTS OR PURPOSES**

The general nature of the business to be transacted by this company, or the objects or purposes of this company, shall be as follows:

a) To engage solely and specifically in the business of carrying on the general practice of medicine, including but without limitation the performance of cardiovascular anesthesia, the provision of related medical services and all activities necessary, customary, convenient, or incident to the practice of medicine.

b) To invest in real estate, mortgages, stocks, bonds or any other type of investments.

c) To own real and personal property necessary for the rendering of the above professional services.

d) In general, to have and exercise all powers conferred by the laws of Florida upon limited liability companies, and to do any and all things hereinabove set forth to the same extent as a natural person might or could do.

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**ARTICLE IV**  
**PRINCIPAL OFFICE**

The mailing address and the street address of the principal office of this company shall be 1511 SW 1<sup>st</sup> Avenue, Ocala, Florida 34474.

**ARTICLE V**  
**REGISTERED OFFICE AND REGISTERED AGENT**

The initial registered office of this company shall be located at 4 S.E. Broadway, Ocala, Florida 34471, and the initial registered agent of this company at such office shall be Jose H. Cortes, Jr., Esquire.

**ARTICLE VI**  
**MANAGEMENT OF COMPANY**

Management of this limited liability company is reserved to its members, whose names and addresses, and Membership Units and Sharing Ratios in the company, are as follows:

Names of Members	Address	No. of Units	Sharing Ratio
Vincent C. Palmire, M.D.	1511 SW 1 <sup>st</sup> Avenue Ocala, Florida 34474	5	50.00
Paul G. Robertie, M.D.	1511 SW 1 <sup>st</sup> Avenue Ocala, Florida 34474	5	50.00

**ARTICLE VII**  
**OPERATING AGREEMENT**

The power to adopt the operating agreement for this company, to alter, amend, or repeal the operating agreement, or to enter into a new operating agreement, shall be vested in the members of this company. The operating agreement for this company shall be for the government of this company and may contain provisions or requirements for the management or conduct of the affairs and business of this company, provided the same are not inconsistent with the provisions of these Articles of Organization, or contrary to the laws of the State of Florida or the United States.

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**ARTICLE VIII**  
**AMENDMENT OF ARTICLES OF ORGANIZATION**

Theses Article of Organization may be amended at any time by the members of this company.

**IN WITNESS WHEREOF**, the undersigned authorized representative of a member of this company has executed these Articles of Organization this 6 day of July, 2005.

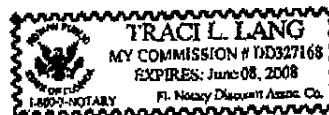
BLANCHARD, MERRIAM  
ADEL & KIRKLAND, P.A.

Jose H. Cortes, Jr., Esquire  
Authorized Representative

**STATE OF FLORIDA**  
**COUNTY OF MARION**

The foregoing instrument was acknowledged before me this 6th day of July, 2005, by Jose H. Cortes, Jr., Esquire, as an authorized representative of this company, who is personally known to me.

Traci L. Lang  
Notary Public, State of Florida



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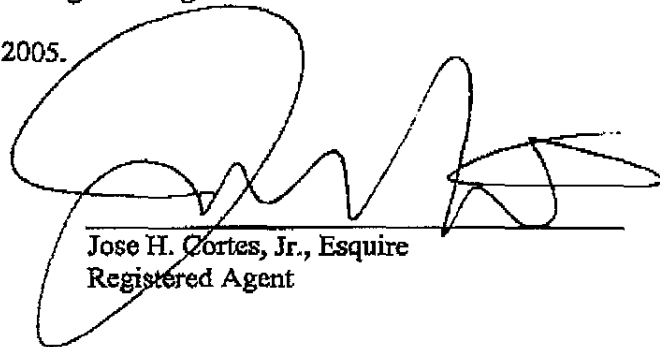
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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT**

The undersigned, being the person named in the Articles of Organization of **STUART CARDIOVASCULAR ANESTHESIA ASSOCIATES, PLLC.**, as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated company at the place designated in the Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of the position of registered agent.

DATED this 6 day of July, 2005.



Jose H. Cortes, Jr., Esquire  
Registered Agent

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