

# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 : (305)633-9696 Fax Number

# LIMITED LIABILITY COMPANY

## Name Availability Doct ment Examiner Upda'er 115 AST DOC DCC

### bvt holdings I, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION	FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Company is:			
SVT HOLDINGS I, LLC			
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:		
Princinal Office Address:	Mailing Address:		
4101 N.W. 3rd Court	4101 N.W. 3rd Court		
Plantation, Florida 33317	Plantation, Florida 33317		
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Signature:		
The name and the Florida street address	ss of the registered agent are:		
Norman T. Roberts,	<b>Esquire</b>		
	27		

50 Wost Mashta Drive, Suite 4

Florida street address (P.O. Box NOT acceptable)

Key Biscayne, FL 33149 City, State, and Zip

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 occupt 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 for in Chapter 608, F.S.

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EMPIRE

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

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

MGRM	Jose A. Birnel, Jr., M.D.
	4101 N.W. 3rd Court
	Plantation, Florida 33317
MGRM	Samuel Vazquez, M.D.
	4101 N.W. 3rd Court
	Plantation, Florida 33317
MGRM	lsaac Telmaciu, M.D.
	4101 N.W. 3rd Court
	Plantation, Florida 33317
<del></del>	

REQUIRED SIGNATURE:

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

(Is 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.)

Norman T. Roberts

Typed or printed name of signee

Filing Fees:

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) 5 5.00 Certificate of Status (Optional)

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