

L05000081134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

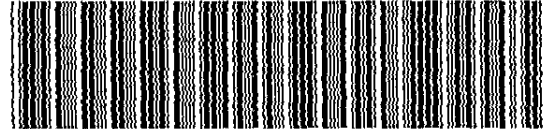
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EFFECTIVE DATE
8/12/05

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05 AUG 17 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



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August 17, 2005

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

TBIM Hospitalists, LLC

Filing Evidence

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
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TALLAHASSEE, FLORIDA
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ARTICLES OF ORGANIZATION
OF
TBIM HOSPITALISTS, LLC

EFFECTIVE DATE
8/12/05

FILED
05 AUG 17 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby certifies that he is the Authorized Representative of a Member who is forming a Limited Liability Company under Florida Statutes Chapters 608. The following Articles of Organization are hereby adopted.

ARTICLE I
NAME

The name of the Limited Liability Company shall be TBIM HOSPITALISTS, LLC.

ARTICLE II
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as of August 12, 2005.

ARTICLE III
ADDRESS; PRINCIPAL OFFICE

The mailing and street address of the Limited Liability Company is 13902 North Dale Mabry Highway, Suite 152, Tampa, Florida 33618.

ARTICLE IV
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 150 Second Avenue North, Suite 1100, St. Petersburg, Florida 33701 and the name of its initial registered agent at such address is Thomas B. Smith.

ARTICLE V
PURPOSE

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

ARTICLE VI
MANAGEMENT

Management of the Limited Liability Company is reserved to its Members in accordance with the Operating Agreement of the Limited Liability Company.

The undersigned, being the Authorized Representative of a Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of TBIM HOSPITALISTS, LLC.

Executed by the undersigned on August 16, 2005.

AUTHORIZED REPRESENTATIVE OF
THE MEMBER



Thomas B. Smith

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT
ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 608.415, Florida Statutes, I agree to act in the capacity of Registered Agent for TBIM Hospitalists, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 608.415, Florida Statutes.

DATED this August 16, 2005.



Thomas B. Smith