

L05000082814

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000200646 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED
05 AUG 22 PM12:22
DIVISION OF CORPORATION

To: Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

STATE
TALLAHASSEE, FLORIDA

05 AUG 22 AM 8:49

FILED

LIMITED LIABILITY COMPANY

bvt holdings II, llc

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



3

H050002006046

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BVT Holdings II, LLC

ARTICLE II - Address:

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

Principal Office Address:

4101 N.W. 3rd Court
Plantation, Florida 33317

Mailing Address:

4101 N.W. 3rd Court
Plantation, Florida 33317

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

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

Norman T. Roberts, Esquire

Name

50 West Mashta Drive, Suite 4

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

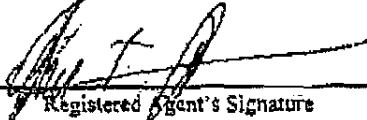
Key Biscayne, FL 33149

FL

City, State, and Zip

FILED
05 AUG 22 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 as provided for in Chapter 608, F.S..


Registered Agent's Signature

(CONTINUED)

Page 1 of 2

H050002006046

TOTAL P. 03

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Jose A. Birriel, 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

Isaac Talmaciu, M.D.

4101 N.W. 3rd Court

Plantation, Florida 33317

(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.)

Norman T. Roberts

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)

WISCONSIN 04/0

SECRET
TALLAHASSEE, FLORIDA

05 AUG 22 AM 8:49

FILED