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To:
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From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
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LIMITED LIABILITY COMPANY

naresh menezes, m.d., llc

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - NAME OF LIMITED LIABILITY COMPANY:

NARESH MENEZES, M.D., LLC

ARTICLE II - MAILING ADDRESS AND STREET ADDRESS OF LIMITED LIABILITY COMPANY:

5118 RUE VEN DOME
LUTZ, FL 33558

ARTICLE III - REGISTERED AGENT'S NAME, OFFICE ADDRESS, AND SIGNATURE:

NARESH MENEZES
5118 RUE VEN DOME
LUTZ, FL 33558

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, FLORIDA STATUTES.

DATED:

10/11/05


REGISTERED AGENT

ARTICLE IV - MANAGEMENT:

THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY ONE MANAGER OR MORE MANAGERS AND IS, THEREFORE, A MANAGER-MANAGED COMPANY. NAMES AND ADDRESSES SPECIFIED BELOW.

- 1) NARESH MENEZES, 5118 RUE VEN DOME, LUTZ, FL 33558
- 2)
- 3)

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TOTAL P.03

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DATED: 10/11/05

X 

SIGNATURE OF MEMBER OR AUTHORIZED REPRESENTATIVE OF A MEMBER

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

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