# Electronic Articles of Organization For Florida Limited Liability Company

L05000109329 FILED 8:00 AM November 10, 2005 Sec. Of State dcushing

## **Article I**

The name of the Limited Liability Company is: ST. JOHNS PROFESSIONAL CENTER, LLC

#### **Article II**

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

150 WARREN CIRCLE JACKSONVILLE, FL. US 32259

The mailing address of the Limited Liability Company is:

150 WARREN CIRCLE JACKSONVILLE, FL. US 32259

## **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### **Article IV**

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

TOD R SMITH 150 WARREN CIRCLE JACKSONVILLE, FL. 32259

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.

Registered Agent Signature: TOD R. SMITH

# Article V

The name and address of managing members/managers are:

Title: MGRM STACEY KOHL 150 WARREN CIRCLE JACKSONVILLE, FL. 32259 US

Title: MGRM PATRICIA A SMITH 150 WARREN CIRCLE JACKSONVILLE, FL. 32259 US

Title: MGRM ADAM J KOHL 150 WARREN CIRCLE JACKSONVILLE, FL. 32259 US

Title: MGRM TOD R SMITH 150 WARREN CIRCLE JACKSONVILLE, FL. 32259 US

Signature of member or an authorized representative of a member

Signature: TOD R. SMITH

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