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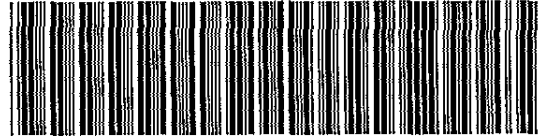
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SEC: JAMES L. CLARK
TALLAHASSEE, FLORIDA

Pedro Reyes-Farinas
Pedro Reyes-Farinas, M.D., L.L.C.
5402 SW 138th Av.
Miami, FL 33175

February 23, 2006

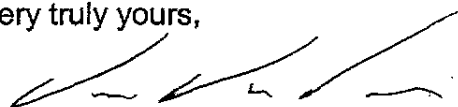
Secretary of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Pedro Reyes-Farinas, M.D., L.L.C.

Dear Sir or Madam:

Enclosed please find the original and one copy of Articles of Organization, together with a check in the amount of \$155.00. This represents the cost of the Filing Fees, Certified Copy of Articles of Organization and Fee for Registered Agent Designation for the above-named organization.

Very truly yours,



Pedro Reyes-Farinas
Pedro Reyes-Farinas, M.D., L.L.C.

Enclosures

check stapled here

ARTICLES OF ORGANIZATION

of

PEDRO REYES-FARINAS, M.D., L.L.C.

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida.

ARTICLE I - ORGANIZATION NAME

The name of the organization is Pedro Reyes-Farinas, M.D., L.L.C.

ARTICLE II - DURATION

The limited liability company shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The limited liability company is organized for the purpose of engaging in the practice of licensed medicine, by individuals licensed in the State of Florida to practice as medical doctors.

ARTICLE IV – ORGANIZATION OFFICE

The organization's principal office address shall be as follows:

Pedro Reyes-Farinas, M.D., LLC
5402 SW 138th Av.
Miami, FL 33175

The organization's mailing address shall be as follows:

5402 SW 138th Av.
Miami, FL 33175

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**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT & REGISTERED
AGENT'S SIGNATURE**

The name and the Florida street address of the Initial Registered Office and Agent of this Organization is:

Pedro Reyes-Farinas
5402 SW 138th Av.
Miami, FL 33175

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.


Dr. Pedro Reyes-Farinas, Registered Agent

ARTICLE VI - MANAGERS

This organization shall have one (1) manager initially. The number of managers may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The name and address of the initial manager of the organization is as follows:

Pedro Reyes-Farinas
5402 SW 138th Av.
Miami, FL 33175

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TALLAHASSEE, FLORIDA

ARTICLE VII - SIGNER

The name and address of the person signing these Articles of Organization is as follows:

Pedro Reyes-Farinas
5402 SW 138th Av.
Miami, FL 33175

ARTICLE VIII – MANAGEMENT

The Limited Liability Company is to be managed by one or more managers who are also members and is, therefore, a member – managed company.

ARTICLE XIX – LIMITATION ON MEMBERSHIP

Members in the LLC shall be limited to those individuals licensed in the State of Florida as a doctor of medicine.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Organization this 27 day of February, 2006.


Pedro Reyes-Farinas

STATE OF _____)
COUNTY OF _____)

See attached

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Pedro Reyes-Farinas, known to me to be the person who executed the foregoing Articles of Organization, or who presented _____ as identification, and who acknowledged before me that he executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this _____ day of February, 2006.

Notary Public
My Commission Expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

Los Angeles

} ss.

On February 27, 2006 before me,

BRUNO J. SARTINI JR. - NOTARY PUBLIC

Date

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared

Pedro Reyes - Farenès

Name(s) of Signer(s)

☐ personally known to me

☒ proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Bruno J. Sartini Jr.
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here