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Law Offices

#### SCOTT DAVID KRUEGER, CHARTERED

A Professional Conferation

MERIDIEN CENTRE 2750 NORTHWEST 43RD STREET, SUITE 201 POST OFFICE BOX 357099 GAINESVILLE, FLORIDA 32635

March 21, 2006

GAINESVILLE (352) 376-3090 OCALA (352) 732-4405

FACSIMILE (352) 377-1580

Secretary of State
Division of Limited Liability Companies
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Via FedEx Overnight delivery

Re:

Incorporation of Southeastern Integrated Medical, P.L. Merger of Southeastern Integrated Medical, P.A.

To whom it may concern:

Enclosed please find an original and one copy of the Articles of Organization of Southeastern Integrated Medical, P.L., as well as a certificate designating Registered Agent/Registered Office, together with our check in the amount of \$125.00 to cover the following costs:

Filing Fee	\$ 100.00
Registered Agent	
Designation Fee	<u> 25.00</u>
Total	<i>\$125.00</i>

Additionally, I enclose an original and one copy of the Certificate of Merger of Southeastern Integrated Medical, P.A., with Southeastern Integrated Medical, P.L., together with our check in the amount of \$50.00, to cover the following costs:

Southeastern Integrated Medical, P.A.	\$ 25.00
Southeastern Integrated Medical, P.L.	<u> 25.00</u>
Total	<u>\$50.00</u>

Your prompt response in return of a confirmation of the filing is appreciated. Thank you for your assistance in this matter.

Sincerely yours,

Scott David Krueze

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## Articles of Organization of Southeastern Integrated Medical, P.L.

The undersigned, for purposes of forming a professional service limited liability company under the Florida Professional Service Corporation and Limited Liability Company Act, hereby adopt(s) the following Articles of Organization:

#### ARTICLE I

The name of this professional limited liability company is "Southeastern Integrated Medical, P.L.", referred to in these Articles as "Company." The period of its duration is perpetual, and the incorporation date is effective as of March 15, 2006. The initial principal place of business and mailing address of this professional service corporation shall be:

4343 Newberry Road, Suite 18 Gainesville, Florida

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#### ARTICLE II

The purpose of this professional service organization is to engage only in every aspect and phase of the business of rendering professional medical services to the general public and to do all things in connection therewith that are customarily done by licensed doctors under the laws of the State of Florida and in

accordance with Chapter 621, Florida Statutes, "The Professional Service Corporation and Limited Liability Company Act."

All professional services shall be rendered only through officers, employees, and agents who are duly licensed under the laws of the State of Florida to practice their profession.

ARTICLE III

The business of this professional service company shall conducted, carried on, and managed by the officers of this professional service Company and a board of Managers composed of one (1) or more members, which number may be altered from time to time in accordance with the Operating Agreement adopted by its Members within the limitations prescribed by law.

This professional service company reserves the right to amend or repeal any provisions contained in these Articles of Organization, or any amendment hereto, and any right conferred upon the Members is subject to this reservation. The power to adopt, alter, amend or repeal the Articles of Organization of this professional service corporation shall be vested in its Members as provided for in the Company's Operating Agreement.

#### ARTICLE IV

No contract or other transaction between a professional service Company and one or more of its Managers, or between a professional service Company and any other corporation, firm, association or other entity, in which one or more of its Managers, directors are Managers, directors or officers, or are financially interested, shall be either void or voidable for this reason alone or by reason alone that such person is present at the meeting of the board of Managers or of a committee thereof which approves such contract or transaction, or that his or their votes are counted for such purpose if:

- officership or financial interest is disclosed or known some to the board or committee, and the board or committee approves such contract or transaction by vote sufficient for such purpose without counting the vote or votes of a such interested Manager or Managers; or
- 2) such common management, directorship, officership, or financial interest is disclosed or known to the Members entitled to vote thereon, and such contract or transaction is approved by vote of the Members; or
- 3) the contract or transaction is fair and reasonable as to the professional service Company at the time it is approved by the board, a committee or the Members.

Common or interested Managers may be counted in determining the presence of a quorum at a meeting of the board of Managers or of a committee which approves such contract or transaction.

#### ARTICLE\_V

The name and address of the initial registered agent and office of this professional service corporation is as follows:

SCOTT DAVID KRUEGER
2750 Northwest 43rd Street, Suite 201
Gainesville, Florida 32606
(352)376-3090

#### ARTICLE VI

The name and address of the authorized representative of one of Members signing these Articles of Organization is:

SCOTT DAVID KRUEGER 2750 Northwest 43rd Street, Suite 201 Gainesville, Florida 32606 (352)376-3090

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this  $21^{5'}$  day of March, 2006.

Scott David Krueger

STATE OF FLORIDA COUNTY OF ALACHUA

JAMAICA M. HUDNALL
MY COMMISSION \* DD 274496
EXPIRES: June 17, 2007
Bonded Thru Budgel Nolery Services

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### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE

In pursuance to the provisions of Chapter 621 and section 607.0501, Florida Statutes, the following is submitted in designating the registered agent and registered office in the state of Florida.

That "Southeastern Integrated Medical, P.L.", desiring to organize under the laws of the State of Florida, has named the following, who is located at the address indicated, as its agent to accept service of process within this state:

SCOTT DAVID KRUEGER 2790 NORTHWEST 43RD STREET, SUITE 200 GAINESVILLE, FLORIDA 32606

#### <u>ACKNOWLEDGMENT</u>

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

Scott David Krueger

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