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.

(((H060001409943)))

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

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)634-3694

Phone Fax Number

: (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

leigh n. bettner, arnp, plc.

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

Electronic Filing Menu Corporate Filing Menu

Help

MAY-23-2006 11:34

406000140994

(3)

.,

. . .

ARTICLES OF ORGANIZATION FOR FLORIDA

PROFESSIONAL LIABILITY COMPANY

FOR

LEIGH N. BITTNER, ARNP, PLC.

ARTICLE I. - NAME

The name of this Professional Liability Company is: LEIGH W. BITTNER, ARNP, PLC.

ARTICLE II. - ADDRESS

The mailing address and street address of the principal offication the Professional Liability Company is:

Principal Office Address:

Mailing Address:

5541 S.W. 94th Avenue Cooper City, FL 33328 5541 S.W. 94th Avenue Cooper City, Fl 33328

ARTICLE III. - REGISTERED AGENT, OFFICE & SIGNATURE

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

LEIGH N. BITTNER
5541 SW 94th Avenue
Cooper City, FL 33328

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

400000140994

4

400000140994

obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

LEIGHON. BITTNER. Registered Agent

ARTICLE IV. - MANAGER (S) OF MANAGING MEMBER (S)

, The names and addresses of each Manager or Managing Member 1

follows:

Titlb:

Name and Address:

Manager

Leigh Bittner 5541 S.W. 94th Avenue Cooper City, FL 33328

REQUIRED SIGNATURE:

leich D. Manager BITTNER, ARNP

ARTICLE V. - PURPOSE

The purpose of LEIGH N. BITTNER, ARNP, Professional Liability Company is to provide advanced nursing/medical care as an independent contractor.

In adcordance 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.

H06000140994

2