

106000070067

Florida Department of State
Division of Corporations
Public Access System

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.

(((H06000178815 3)))

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 : NATIONAL REGISTERED AGENTS, INC.
Account Number : I20030000062
Phone : (609) 716-0300
Fax Number : (609) 716-0820

2006 JUL 13 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Michael D. Moore, D.O., L.L.C.

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

RECEIVED
06 JUL 13 AM 7:43
DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing Menu

Help

106-70067
gl

(((H06000178815 3)))

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Michael D. Moore, D.O., L.L.C.**ARTICLE II - Address:**

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

Principal Office Address:20952 Broadwater DriveLand O'Lakes, Florida 34638**Mailing Address:**20952 Broadwater DriveLand O'Lakes, Florida 34638

2006 JUL 13 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Michael Moore

Name

20952 Broadwater DriveFlorida street address (P.O. Box NOT acceptable)Land O'LakesFLORIDA 34638

City, State, and Zip

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..

Michael MooreBy: 

Registered Agent's Signature

(((H06000178815 3)))

((C+06000178815 3)))

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Michael Moore

20952 Broadwater Drive

Land O'Lakes, Florida 34638

(Use attachment if necessary)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 JUL 13 AM 9:49

FILED

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**
Signature of a member or an authorized representative of a member.

(In accordance 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.)

Michael Moore

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

((C+06000178815 3)))