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ACCOUNT NO. : 072100000032	
REFERENCE: 489820 10281A	
AUTHORIZATION :	
COST LIMIT : \$ 125.00	nelsolenan
ORDER DATE : September 28, 2006	
ORDER TIME : 5:50 PM	
ORDER NO. : 489820-005	Zei TALI
CUSTOMER NO: 10281A	SEP SEP
DOMESTIC FILING NAME: ADVANCED DERMATOLOGY CENTER, LLC	LED 29 P I: II
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	· ·
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Jeanine Reynolds - EXT. 2933	
EXAMINER'S INITIALS:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

ADVANCED DERMATOLOGY CENTER, LLC

ARTICLE I Name

The name of this Limited Liability Company is ADVANCED DERMATOLOGY CENTER, LLC.

ARTICLE II Address

The mailing address and street address of the principal office of the Limited Liability Company is 6017 Cocos Drive, Fort Myers, Florida 33908.

ARTICLE III Duration

The period of duration of the Limited Liability Company is perpetual.

ARTICLE IV Registered Office and Agent

The initial registered office of this Company shall be 6017 Cocos Drive, Fort Myers, Florida 33908, and its initial registered agent at such office shall be Michael J. Haiken.

ARTICLE V Management

The Limited Liability Company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the Company. These regulations may contain additional provisions for the regulation and management of the affairs of the Company consistent with law or these articles of organization. The names and addresses of the members of the Company are:

NAME ADDRESS

Michael J. Haiken, M.D., P.A., 6017 Cocos Drive a Florida corporation Fort Myers, FL 33908

ARTICLE VI Admission of Additional Members

Additional members will be admitted only with the unanimous consent of all Members upon such terms as are unanimously agreed to by all Members.

ARTICLE VII Members Rights to Continue Rusiness

The remaining members of the Limited Liability Company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

day of September, 2006. Dated this _

MICHAEL J. HAIKEN, M.D., P.A.

By: MICHAEL J. HAIKEN, as President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA:

- 1. The name of the Limited Liability Company is ADVANCED DERMATOLOGY CENTER, LLC.
- 2. The name and address of the registered agent and office is:

Michael J. Haiken

6017 Cocos Drive Fort Myers, FL 33908

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.

Dated: September 25, 2006

MICHAEL J. HAIKE