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.

(((H07000001872 3)))



H070000018723ABCZ

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

: RUTHERFORD MULHALL, P.A.

Account Number : 075753002301

(561)241-1600

Phone Fax Number

(561)241-3815

MECEIVED JAN-3 PH 3: I

LORIDA/FOREIGN LIMITED LIABILITY CO.

SPINE MED OF THE PALM BEACHES, LLC

Certificate of Status	0
Certified Copy	1
, Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

N. Company

JAN 4 2007

1/3/2007 2:30 PM

Fax Audit No. H07000001872 3

ARTICLES OF ORGANIZATION OF SPINE MED OF THE PALM BEACHES, LLC

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

ARTICLE I - NAME

The name of this limited liability company ("Company") is: SPINE MED OF THE PALM BEACHES, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is: 3934 Pinehurst Drive, Lake Worth, FL 33467

O7 JAN -3 AM 8: 16 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE III - REGISTERED AGENT AND REGISTERED OFFICE

The name and the Florida street address of the registered agent is: Dexter DiMarco, 3934 Pinchurst Drive, Lake Worth, FL 33467

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.

DEXTON DIMARCO

Date

Fax Audit No. H07000001872 3

Fax Audit No. _H07000001872 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

MGRM

Dexter DiMarco

Name and Address:

3934 Pinchurst Drive

Lake Worth, FL 33467

MGRM

Cynthia C. DiMarco 3934 Pinehurst Drive Lake Worth, FL 33467

The undersigned executed these Articles of Organization effective as of January 3, 2007.

DEXTER DIMARCO, Managing Member

Fax Audit No. H07000001872 3