

L070000005960

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700082487867

FILED

07 JAN 17 PM 4:47

DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

RECEIVED

07 JAN 17 PM 12:51

DEPARTMENT OF REVENUE
DIVISION OF REGISTRATION
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 715762 7226307

AUTHORIZATION :

COST LIMIT : \$ 125.00

FILED
07 JAN 17 PM 4:47
TALLAHASSEE, FLORIDA

ORDER DATE : January 17, 2007

ORDER TIME : 10:51 AM

ORDER NO. : 715762-005

CUSTOMER NO: 7226307

DOMESTIC FILING

NAME: GARDENS MEDICAL PAVILION, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace - EXT. 2928

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR GARDENS MEDICAL PAVILION, LLC

The undersigned individuals of a limited liability company formed under the Florida Limited Liability Company Act hereby adopt the following Articles of Organization:

Article I - Name

The name of the limited liability company is Gardens Medical Pavilion, LLC.

Article II - Address

The mailing address and street address of the limited liability company's principal office is 5601 Corporate Way, Suite 404, West Palm Beach, Florida 33407.

Article III - Registered Agent and Registered Office

The name and street address of the registered agent is Brian K. Waxman, 5601 Corporate Way, Suite 404, West Palm Beach, Florida 33407.

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 609, Florida Statutes.


Brian K. Waxman, Registered Agent

Article IV - Management

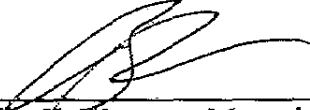
The business of the limited liability company shall be conducted under the management of the managing members who shall have the authority to act for the limited liability company in all matters. The name and street address of the managing members are Brian K. Waxman and Peter J. Applefield, 5601 Corporate Way, Suite 404, West Palm Beach, Florida 33407. From time to time in accordance with the limited liability company operating agreement, the managing member may delegate certain of their management rights and responsibilities to duly appointed officers of the limited liability company. The managing members hereby appoint:

Tucker Frederickson

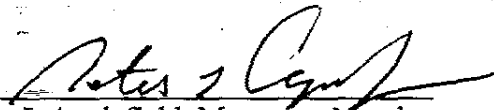
as the President of the limited liability company, to have those management rights and responsibilities ascribed to such office by the operating agreement of the limited liability company.

FILED
07 JAN 17 PM 4:47
TALLAHASSEE, FLORIDA

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 and correct.



Brian K. Waxman, Managing Member



Peter J. Applefield, Managing Member