L07000022993

(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:			
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)		
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
(City/State/Zip/Phone #) PICK-UP	(Address)		
(City/State/Zip/Phone #) PICK-UP			
(City/State/Zip/Phone #) PICK-UP	(Address)		
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)		
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status		<u> </u>	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(City/State	/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		ŗ	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	☐ PICK-UP	WAIT MAIL	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Business Entity Name)		
Certified Copies Certificates of Status Special Instructions to Filing Officer:	•	•	
Certified Copies Certificates of Status Special Instructions to Filing Officer:			
Special Instructions to Filing Officer:	(Document Number)		
Special Instructions to Filing Officer:			
4	Certified Copies	Certificates of Status	
4			
4			
	Special Instructions to Filing C	Officer:	
· ALL			
· ALL		-	
· • • • • • • • • • • • • • • • • • • •		MP,	
•		•	

Office Use Only



700089235607

02/28/07--01038--017 **125.00





Please Reply to: St. Petersburg, FL lammons@trenam.com

February 26, 2007

VIA REGULAR MAIL

Registration Section
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Trinity Family Physicians, PL

Dear Sir or Madam:

I am enclosing the Articles of Organization for Trinity Family Physicians, PL for filing with the Secretary of State. Please file upon receipt. Also enclosed is Check No. 1121 for \$125,00, which amount represents the filing fee.

If you have any questions, please call me.

Sincerely,

Lori L. Ammons Legal Assistant

cc: Amir Shirmohammad, M.D. Stephanie Eldridge, M.D.

Sou of Ammore

Enclosures (2)

ARTICLES OF ORGANIZATION of TRINITY FAMILY PHYSICIANS, P.L.

The undersigned, as "Members," desiring to form a limited liability company under and pursuant to the Florida Professional Corporation and Limited Liability Company Act, Chapter 621 Florida Statutes, does hereby adopt the following Articles of Organization:

ARTICLE I. NAME

The name of the limited liability company is **Trinity Family Physicians**, P.L. (the "Company").

ARTICLE II. ADDRESS

The Company's initial principal street and mailing address is 2539 View Drive, Winter Gardens, FL 34787.

ARTICLE III. DURATION AND CONTINUATION

The duration of the Company commences upon filing these Articles. The Company shall have perpetual existence. The death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or the occurrence of any other event that terminates the continued membership of a Member will not cause dissolution of the Company, and the remaining Member(s) have the right to continue the business of the Company, such to the provision of these Articles and applicable law.

ARTICLE IV. PURPOSE

The purpose for which the Company is being formed is to engage in the practice of medicine, and each of its subspecialties, without limitation.

ARTICLE VI. REGISTERED OFFICE AND REGISTERED AGENT

The name and address of the initial Registered Agent of the Company to accept service of process within this state are:

Name:

Amir Shirmohammad, M.D.

Address:

2539 Prairie View Drive, Winter Garden, FL 34787

ARTICLE VII. MEMBERS

- A. Persons who have interests in the capital of the Company are referred to herein as "Members." The interests of a Member in the Company are referred to as "Shares." Additional Members may be admitted upon the approval of the Members of the Company in the manner set forth in the "Operating Agreement" between the Company and its Members; however, no one may be admitted as a Member unless such person is a physician licensed to practice medicine in Florida under chapters 458 or 459, or their successor chapters. No transfer of a Member's Shares shall be permitted except in accordance with the Operating Agreement.
- B. If any Member who has been rendering professional services as a physician to the public becomes legally disqualified to render professional services as a physician within the State of Florida, or if the Member accepts employment that places restrictions or limitations upon his or her continued rendering of such professional services, then, in any such event, such person's office and/or employment with, and/or Shares in, this Company shall immediately and automatically cease and terminate except to receive payment for whatever Shares in this Company may be owned by the person as a Member.
- C. The Shares of the Member whose interest is terminated because of the application of the preceding subparagraph shall not thereafter be entitled to voting rights (except as provided hereinafter in regard to liquidation and dissolution or amendment).
- D. The Shares owned by a Member who has become disqualified to render professional services as a physician shall forthwith be transferred, sold, purchased, or redeemed at such price or value and under such terms as are authorized or set forth in the Operating Agreement or other Members' agreement, if any, and if not,

by mutual agreement or, if no such agreement can be reached within a reasonable time under the circumstances (and any event within thirty (30) days), then by arbitration in accordance with the Florida Arbitration Code then in effect.

E. However, if a sole Member of this Company becomes disqualified to render professional services for the Company, the Company shall cease all business or professional activity until the Member's Shares are transferred to a person duly qualified to render professional services as a physician, or until the Company is liquidated and dissolved, or until those Articles are amended into a regular business organization under applicable law, and for those limited purposes only the Member shall have voting rights as to his or her Shares.

ARTICLE VIII. MANAGEMENT

The Company is a manager-managed company.

ARTICLE IX. EMERGENCY REGULATIONS

The power to adopt, alter, amend, or repeal the Operating Agreement is vested in the Members of the Company. However, the Manager(s) may adopt emergency "Regulations," provided no such Regulations shall change the procedures for calling Member or Manager meetings, setting quorum requirements or designating substitute or additional Managers.

ARTICLE X VOTING OF MEMBERS

The voting rights of Members shall be specified in the Operating Agreement. Members may have voting or non-voting Shares.

ARTICLE XI. CAPITAL ACCOUNTS OF MEMBERS

Each Member of the Company shall maintain a capital account in accordance with the Operating Agreement.

ARTICLE XII. PROFITS AND LOSSES

Except as otherwise provided in the Regulations, profits, losses, and credits

shall be allocated among Members in the ratios of their respective Shares.

IN WITNESS WHEREOF, the undersigned, has hereunto signed these Articles as of the 22 day of February, 2007 for the purpose of organizing this Company under the laws of the State of Florida.

Stephanie Eldridge M.D.

Amir Shirmohammad, M.D.

Husband and Wife, as Tenancy by the Entireties

ACKNOWLEDGMENT

Having been named to accept service of process for the above-stated Company, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office. February 22, 2007.

Amir Shirmohammad, M.D.

2001 FEB 28 P 12: 54
SECRETARY OF STATE