

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

Account Name : SHUTTS & BOWEN LIP OPERATING ACCOUNT?

Account Number : I20030000037

Phone : (561)835-8500

Fax Number

: (561)650-8530

FLORIDA/FOREIGN LIMITED LIABILITY CO.

F.E. SESKIN, M.D., LLC

Certificate of Status	0
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Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

F.E. SESKIN, M.D., LLC

ARTICLE II - Address

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

Mailing and Street

Address:

132 Minorca Ave.

Coral Gables, FL 33134

Attn: Marvin Bondhus, M.D., President Jose Smith, Chief Financial Officer

ARTICLE III - Registered Agent and Office

The name and the Florida street address of the initial registered agent of the Limited Liability Company are:

Registered Agent:

CORPORATION COMPANY OF MIAMI

Street Address

250 Australian Ave. Suite 500 (JAF)

West Palm Beach, Florida 33401

ARTICLE IV - Management

The Limited Liability Company is to be managed by one or more Members and is, therefore, a member-managed company.

Date: July 17, 2007

F.E. SESKIN, M.D., LLC

a Florida limited liability company

James A. Varrell as authorized agent for

Urology Specialty Group, LLC, Manager

(in accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under

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the penalties of perjury that the facts stated herein are true.)

REGISTERED AGENT ACCEPTANCE

Having been named to accept service of process for the above stated limited liability company at the address designated in this certificate pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete discharge of its duties.

CORPORATION COMPANY OF MIAMI REGISTERED AGENT

By: _____

Title: Vice President

PILED

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SECRETARY OF STATE
TALLAHASSEF, FI DRID.

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)

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