

L07000078439

(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



100106878031

07/30/07--01046--014 **155.00

AL

FILED

2007 JUL 30 A 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SALM Medical Group, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linda Gates

(Name of Person)

Evelyn F. Parkes, CPA, PA

(Firm/Company)

420 Clematis street, 2nd Floor

(Address)

West Palm Beach, FL 33401

(City/State and Zip Code)

For further information concerning this matter, please call:

Linda Gates

(Name of Person)

at (561) 366-9250

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
2001 JUL 30 A 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
For
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME:

The name of the company shall be:

SALM Medical Group, LLC

ARTICLE II ADDRESS:

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

10131 Forest Hill Boulevard, Suite 100A
Wellington, Florida 33414

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE:

The name and the Florida street address of the registered agent is:

Armando Marull, M.D.
10131 Forest Hill Boulevard, Suite 100A
Wellington, Florida 33414

FILED
2007 JUL 30 A 8:
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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, Florida Statutes.

Registered Agent's Signature

ARTICLE IV EFFECTIVE DATE:

The effective date of the Limited Liability Company is: August 1, 2007

Signature of a member or an authorized representative of a member.

(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.)

ARMANDO MARULL, M.D.
Typed or printed name of signee