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EXAMINER

ROBERT R. FOSTER

MAILING ADDRESS: POST OFFICE BOX 41 DELAND, FLORIDA 32721-0041 108 WEST RICH AVENUE TELEPHONE: (386) 734-8224 FAX: (386) 822-9664

May 8, 2008

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VIA UPS OVERNIGHT LETTER

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Suite 200 Tallahassee, Florida 32301-2551

Re: HITCHCOCK, PL

Gentlemen:

Enclosed you will find the following:

- 1. Original and one copy of Articles of Organization;
- 2. A check payable to the Department of State in the total amount of \$155.00 for filing fee, certified copy of Articles and registered agent fee.
- 3. A return UPS Overnight Letter slip for transmitting the certified copy of the Articles to me.

Please file the Articles and forward the certified copy to me, together with your statement for services. My account number with you is AT-8224. If you encounter any problems with this filing, please notify me immediately. Thank you very much for your assistance.

Very truly yours,

RRF:mj

Enc.

ARTICLES OF ORGANIZATION

OF

HITCHCOCK, PL



ARTICLE I

NAME AND PRINCIPAL PLACE OF BUSINESS

The name of this limited liability company shall be HITCHCOCK, PL ("Company"). The principal place of business of the Company in Florida shall be 105 Ridgeway Boulevard, DeLand, Florida 32724, and its mailing address is the same.

ARTICLE II

PURPOSES AND POWERS

This limited liability company is organized pursuant to Florida Statutes Chapter 621, for the purpose of providing medical services and shall have the power to engage in any activity or business authorized under Florida Statutes and, in general, carry on any and all incidental business, to have and exercise all the powers conferred by the laws of the State of Florida, and to do any and all things set forth in these Articles to the same extent as a natural person might or could do.

ARTICLE III

MANAGEMENT AND EXERCISE OF POWERS

Management of this limited liability company is reserved to the members. The name and address of the initial managing member

are as follows:

Thomas A. Hitchcock 105 Ridgeway Boulevard DeLand, Florida 32724

The powers of this limited liability company shall be exercised by or under the authority of, and the business and affairs shall be managed under, the direction of the members of this limited liability company.

This Article may be amended from time to time in accordance with the regulations of this limited liability company adopted by majority vote of the members.

ARTICLE IV

MEMBERSHIP

Except as provided below, this limited liability company shall exist in perpetuity or until dissolved in a manner provided by law or as provided in the regulations adopted by the members.

Upon the death, bankruptcy or dissolution of a member, or upon the occurrence of any other event which terminates the continued membership of a member in this limited liability company, this limited liability company shall be dissolved except upon the consent of the remaining members.

ARTICLE V

MEMBERSHIP

Except as provided otherwise in any applicable Members

Agreement, new members of this limited liability company may only
be admitted upon unanimous consent of the existing members.

Contributions required of new members shall be determined as to the time of admission of this limited liability company.

Except as provided otherwise in any applicable Members'

Agreement, a member's interest in this limited liability company

may not be sold, assigned, transferred or conveyed without

unanimous written consent of all members, to a qualified

individual of the medical profession, and an assignee of an

interest in this limited liability company may become a member

only upon consent of all existing members.

ARTICLE VI

CAPITAL CONTRIBUTIONS

Initial capital contributions to this limited liability company by the members will be made as required and as determined by unanimous consent of the members. Additional contribution will be made in such proportionate amounts as to maintain the capital accounts in the same proportion as arose from the original contribution as set forth above.

ARTICLE VIII

PROFITS AND LOSSES

A. Profits. After payment of the expenses of this limited liability company, each member shall be entitled to a distributive share of the profits of this limited liability company in accordance with an agreed upon formula or, in the absence of such formula, in proportion to each member's then outstanding contributed and not returned capital. The

distributive share of the profits shall be determined and paid to the members by December 31st of each year.

B. Losses. Any losses which occur in the operation of this limited liability company shall be paid from the profits and capital of this limited liability company or, if the profits and capital are not sufficient to pay these losses, by the members in proportion to their capital accounts.

ARTICLE VIII

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of this limited liability company is 105 Ridgeway Boulevard, DeLand, Florida 32724, and the name of the initial registered agent of this limited liability company at that address is Thomas A. Hitchcock.

ARTICLE IX

AMENDMENTS

This limited liability company reserves the right to amend or repeal any provision contained in these Articles of Organization or any amendment thereto upon the affirmative vote of the members representing a majority of the then outstanding contributed and not returned capital of this limited liability company.

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at DeLand, Florida, for the foregoing uses and purposes this $\frac{1}{2}$ day of

May, 2008.

THOMAS A. HITCHCOCK

STATE OF FLORIDA COUNTY OF VOLUSIA

Personally appeared before me, THOMAS A. HITCHCOCK, who has produced is personally known to me as identification and to me well known to be the person described in and who executed the foregoing Articles of Organization and he acknowledged before me that he signed, sealed and acknowledged the same at the time, place and in the manner and for the uses and purposes as therein set forth and contained.

WITNESS my hand and official seal this _____ day of ______, 2008.



Print Name: Margaret To Mes

Notary Public, State of Florida

My Commission Expires: 6310

My Commission Expires: 6 3 10 Commission Number: 00 (440)

ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the Articles of Organization of HITCHCOCK, PL, as the registered agent of this limited liability company, hereby consents to his appointment as registered agent of the Company.

THOMAS A. HITCHCOCK, Registered Agent