

L080000888/2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

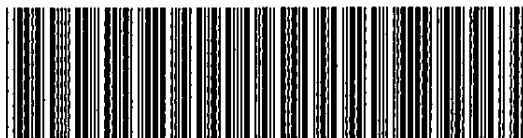
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

9/18/08

MyCorporation

An Intuit Company

21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

intuit.

Toll-Free: 888-692-6771 | Direct: 818-436-8225 | FAX: 818-879-8005

E-mail: [info@mycorporation.com](mailto:info@mycorporation.com)

## ROUTINE SERVICE FILING REQUEST

Wednesday, August 27, 2008

Division of Corporations  
Florida Department of State  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: *Coastal Medical Group LLC***

Ladies and Gentlemen:

Please find enclosed for filing Articles of Organization for the above referenced company.

Enclosed is a check in the amount of \$155.00 for filing and for a **certified copy**.

Please return the **certified copy** to the address below.

Thank you for your assistance.

Sincerely,

MyCorporation, an Intuit Company  
**Attn: Fulfillment Dept.**  
21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

**Articles of Organization  
For  
Coastal Medical Group LLC  
Florida Limited Liability Company**

**ARTICLE I - Name:**

The name of the Limited Liability Company is Coastal Medical Group LLC.

**ARTICLE II - Address:**

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

4747 Nob Hill Road, Suite 13  
Sunrise, Florida 33351

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Julie Edelstein  
1297 Manor Court  
Weston, Florida 33326

*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.*

  
Julie Edelstein, Registered Agent

**ARTICLE IV - Management:**

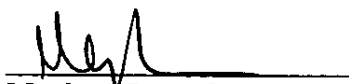
The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Rick I. Edelstein  
1297 Manor Court  
Weston, Florida 33326

Victor Palomino  
869 Ansley Court  
Weston, Florida 33326

Joseph Bombardiere  
4110 Center Pointe Dr. #217  
Fort Myers, Florida 33916

Karen Lutz  
4522 Hunting Trail  
Lake Worth, Florida 33467

  
Meghan Record, Organizer

