

LD8000111543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

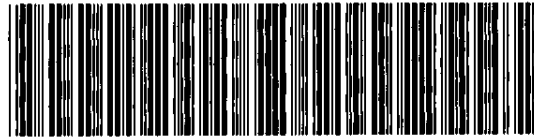
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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RECEIVED  
08 DEC -5 AM 10:56  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
08 DEC -5 PM 1:35  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

DEC - 5 2008

EXAMINER



UCC FILING & SEARCH SERVICES, INC.  
1574 Village Square Blvd Ste 100  
Tallahassee, Florida 32309  
(850) 681-6528

**HOLD**  
FOR PICKUP BY  
UCC SERVICES  
OFFICE USE ONLY

December 5, 2008

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Alliance Medical and Rehabilitation, LLC

**Filing Evidence**

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include  
Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY**

FILED  
08 DEC -5 PM 1:35  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

**Alliance Medical and Rehabilitation, LLC**

**ARTICLE II – Address:**

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

**Principal Office Address:**

125 Newtown Road  
Plainview, NY 11803

**Mailing Address:**

125 Newtown Road  
Plainview, NY 11803

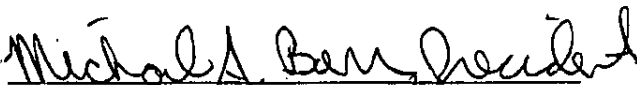
**ADDRESS OF PRINCIPAL OFFICE**

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

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

United Corporate Services, Inc.  
9200 South Dadeland Blvd., Suite 508, Miami, Florida 33156

*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, F.S.*

  
Registered Agent's Signature

**ARTICLE IV – Manager(s) or Managing Member (s):**

The name and address of each Manager or Managing Member is as follows:

<b><u>Title:</u></b> "MGR" = Manager "MGRM" = Managing Member	<b><u>Name and Address:</u></b> Timothy Damadain
	125 Newtown Road
<b><u>Managing Member</u></b>	Plainview, NY 11803

**REQUIRED SIGNATURE:**

  
Thomas D. Osgood, Authorized Representative of the 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.)

**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)**