

JAN-08-2009 THU 10:16 AM B R D & W P. A.

FAX NO.

P. 01

Division of Corporations

Page 1 of 1

L091000007135

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000004466 3)))



H090000044663ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

L. SELLERS

JAN - 9 2009

EXAMINER

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BATTAGLIA ROSS CORPORATE
Account Number : I20000000275
Phone : (727) 381-2300
Fax Number : (727) 343-4059

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Florida On Site Health Services, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$125.00 |

RECEIVED

09 JAN - 8 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN - 8 AM 8:07

FILED

1/8/2009

(H09000004466 3))

**ARTICLES OF ORGANIZATION
FOR
FLORIDA ON SITE HEALTH SERVICES, LLC
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIDA ON SITE HEALTH SERVICES, LLC

ARTICLE II- Address:

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

Principal Office Address:

9956 Sago Point Dr.
Largo, FL 33777

Mailing Address:

9956 Sago Point Dr.
Largo, FL 33777

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

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

Lisa Merkow Smajovits
9956 Sago Point Dr.
Largo, FL 33777

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
Lisa Merkow Smajovits

(H09000004466 3))

FILED
09 JAN -8 AM 8:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(H09000004466 3))

ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGR" = Manager

"MGRM" = Managing Member

| Title: | Name and Address: |
|--------|---|
| MGR | Jerry W. Bratton 139 South Moore Rd. Coppell, TX 75019 |
| MGR | Lisa Merkow Smajovits 9956 Sago Point Dr. Largo, FL 33777 |
| MGR | Richard Turbin 4650 Links Village Dr. Unit C-103 Ponce Inlet, FL 32127 |

REQUIRED SIGNATURE:



LISA MERKOW SMAJOVITS

(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.)

(H09000004466 3))

FILED
09 JAN -8 AM 8:07
CLERK OF STATE
TALLAHASSEE FLORIDA