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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

MAR 10 2009

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 03/10/09

REF. #: RA2323.101276

CORP. NAME: ANESTHESIA MANAGEMENT SERVICES, LLC

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TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 529576 **FOR \$** 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
ANESTHESIA MANAGEMENT SERVICES, LLC**

1. Name. The name of the limited liability company is **ANESTHESIA MANAGEMENT SERVICES, LLC** (the "Company").
2. Duration. The Company shall be effective upon the filing of these Articles of Organization and shall have perpetual existence thereafter.
3. Purpose. The Company is organized for the purpose of transacting all lawful activities and business that may be conducted by a limited liability company under Florida law.
4. Place of Business. The mailing address and street address of the Company's principal office is 5501 W. Gray Street, Tampa, Florida 33609.
5. Initial Registered Agent and Office. The name and Florida street address of the initial registered agent is CorpDirect Agents, Inc., 515 E. Park Avenue, Tallahassee, Florida 32301.
6. Additional Members. Additional members may be admitted to the Company, but only upon the consent of the existing Members of the Company at the time admission is sought, all in accordance with the Operating Agreement of the Company.
7. Termination of Membership. The remaining Members shall have the right to continue the business of the Company, and may agree to do so, upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or upon the occurrence of any other event which terminates the continued membership of a Member in the Company.
8. Management and Officers of the Company. The Company shall be managed in accordance with the Operating Agreement adopted by all of the Members. Unless and until changed by the Operating Agreement, the Company shall have the following Officers until the earlier of his successor being appointed or his death or resignation: Rodolfo Gari, Jr., CEO; and Michael Doyle, President and Chief Operating Officer. Each Officer shall have full power and authority to act for and on behalf of the Company, including, without limitation, to enter into contracts, open and close bank accounts, incur and pay debts and expenses, file papers with the Internal Revenue Service, and engage professionals and other advisors, and all persons may rely on these Articles of Organization to deal directly with each such named individual Officer on all matters relating to the Company.
9. Amendment. These Articles of Organization may be amended or restated in accordance with the terms and approval requirements of the Operating Agreement.

The undersigned executed these Articles of Organization on March 9, 2009.

By: 

Michael Doyle, President and
Member's Authorized Representative

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TALLAHASSEE, FLORIDA

ACCEPTANCE BY REGISTERED AGENT

Having been appointed as the registered agent of and to accept service of process for
ANESTHESIA MANAGEMENT SERVICES, LLC at the address stated above, I hereby
accept such appointment, agree to act in this capacity, and accept all obligations as registered
agent as set forth in Chapter 608 of the Florida Statutes.

Dated: 3/10/09

CORPDIRECT AGENTS, INC.

By: Katie Wonsch, Asst. Sec.

Print Name: Katie Wonsch

Print Title: Assistant Secretary