

L09000069475

Florida Department of State

Division of Corporations

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Fax Number : (850)617-6383

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Account Name : EMPIRE CORPORATE KIT COMPANY

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TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CORAL GABLES FOOT & ANKLE, LLC

Certificate of Status	0
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J. BRYAN
JUL 23 2009
EXAMINER

③

#09000167887

ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

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FIRST: The name of the limited liability company is:
Coral Gables Foot & Ankle, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
Coral Gables Foot & Ankle, LLC is the incorrect name of the business. The word

"Specialists" was inadvertently left off the articles of organization. The correct
name of the business is Coral Gables Foot & Ankle Specialists, LLC. Additionally,
Suite #310 needs to be added to the filed address. Amending RA per
attached RA Change form
OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: July 21, 2009


Signature of a member or authorized representative of a member

Max A. Adams, Esq.
Typed or printed name of signer

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

CR2E062 (08/05)

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- Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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TALLAHASSEE, FLORIDA

1. Coral Gables Foot & Ankle, LLC
Name of Limited Partnership or Limited Liability Limited Partnership

2. 07/20/2009
Date of filing/registration in Florida

3. L09000069475
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

SMITH, BRIGETTE D.P.M.
Name
401 Coral Way
Address
Coral Gables, FL 33134
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Max A. Adams, Esq.
Name
1400 NW 10th Ave., PH#3
Florida street address (P.O. Box not acceptable)
Miami FL 33136
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
Signature of Registered Agent

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(3)

**Articles of Organization
of**

CORAL GABLES FOOT & ANKLE, LLC

The undersigned natural person(s), of the age of eighteen years or more, acting as organizers of a limited liability company under the State of Florida Limited Liability Company Act, adopt(s) the following Articles of Organization for such limited liability company.

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Article 1. Name of Limited Liability Company

The name of this limited liability company is CORAL GABLES FOOT & ANKLE, LLC.

Article 2. Registered Office and Registered Agent

The initial registered office of this limited liability company and the name of its initial registered agent at this address are:

BRIGETTE SMITH, D.P.M.
401 CORAL WAY,
CORAL GABLES, FLORIDA 33134

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Article 3. Statement of Purposes

The purposes for which this limited liability company is organized are:

To engage in the lawful practice of medicine, and to provide medical services to the general public under the laws of the State of Florida.

Article 4. Management and Names and Addresses of Initial Manager

This will be a member-managed company. The name and address of each managing member is:

BRIGETTE SMITH
401 CORAL WAY,
CORAL GABLES, FLORIDA 33134

Article 5. Principal Place of Business of the Limited Liability Company

The principal place of business of the limited liability company shall be:

401 CORAL WAY,
CORAL GABLES, FLORIDA 33134

Article 6. Period of Duration of the Limited Liability Company

The period of duration of the limited liability company shall be:

"Perpetual"

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Article 7. Company Existence

The Company's existence shall begin effective as of JULY 20, 2009.

The undersigned authorized representative of a member executed these Articles of Organization on 7/20/2009.



The Law Offices of Max A. Adams
Max A. Adams, Esq.

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STATEMENT OF REGISTERED AGENT


LIMITED LIABILITY COMPANY:

CORAL GABLES FOOT & ANKLE, LLC

REGISTERED AGENT/OFFICE:

BRIGETTE SMITH
401 CORAL WAY,
CORAL GABLES, FLORIDA 33134

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.



BRIGETTE SMITH, D.P.M.
by Max Adams as attorney-in-fact

Date: 7/20/2009

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