

Aug. 19, 2009 12:03PM
Division of Corporations

GREENE, HAMRICK, PERREY, QUINLAN & SCHERMER, PA

Page 1 of 1

LOG 000079977

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.

((H09000185176 3)))



H090001851763ABC4

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

To:

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

From:

Account Name : GREENE, HAMRICK, PERREY, QUINLAN & SCHERMER, PA
Account Number : I19990000030
Phone : (941) 747-1871
Fax Number : (941) 745-2866

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 19 AM 8:22

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Anna Maria Rehab, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

T. CLINE

AUG 20 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Anna Maria Rehab, LLC

ARTICLE II - Address:

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

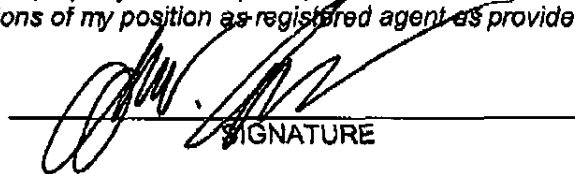
601 12th Street West
Bradenton, Florida 34205

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

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

John V. Quinlan, Esq.
601 12th Street West
Bradenton, Florida 34205

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 property 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.

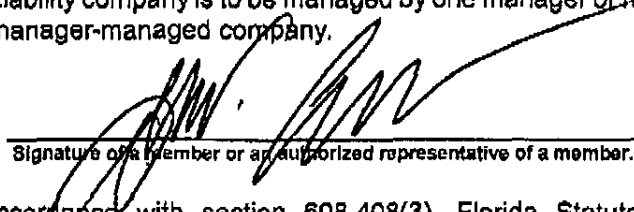

SIGNATURE

2009 AUG 19 8:22 AM
STATE OF FLORIDA
TALLAHASSEE

FILED

ARTICLE IV - Management:
(Check box if applicable)

- ☒ The Limited Liability company is to be managed by one manager or more managers and is, therefore, a manager-managed company.


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

John V. Quinlan
Typed or printed name of signer