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Fax Number : (850)617-6383

from:

: SHUMAKER, LOOP & KENDRICK LLP Account Name

Account Number : 075500004387 Phone : (813)229-7600

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Tampa Cardiac Specialists, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
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EXAMINER

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H09000202240 3

ARTICLES OF ORGANIZATION TAMPA CARDIAC SPECIALISTS, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is Tampa Cardiac Specialists, LLC.

ARTICLE II - Address:

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

Principal Office Address: 4211 Van Dyke Road 2nd Floor East, Suite 205 Lutz, FL 33558 Mailing Address: P.O. Box 18036 Tampa, FL 33679-8036

ARTICLE III - Management:

The Limited Liability Company is to be managed by a manager or managers. The name and address of the initial managers are as follows:

Kevin J. Makati, M.D. 4211 Van Dyke Road 2nd Floor East, Suite 205 Lutz, FL 33558

Christopher J. Pastore, M.D. 4211 Van Dyke Road 2nd Floor East, Suite 205 Lutz, FL 33558

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 16th day of September 2009.

Signature of 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.)

Erin Smith Aebel, Esq.

Typed or printed name of signee

H09000202240 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is Tampa Cardiac Specialists, LLC.
- 2. The name and the Florida street address of the registered agent are:

Erin Smith Aebel, Esq.
Shumaker, Loop & Kendrick, LLP
101 East Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

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.

Erin Smith Aebel, Esq. Registered Agent

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SECRETARY OF STATE