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B. KOHR

DEC - 9 2009

EXAMINER

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

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: ASHLEY SMITH

DATE: 12-09-2009

REF. #: 000177.115833

CORP. NAME: COMPASS HEALTH CARE CONSULTING, LLC

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- |  |   |   |
|--|---|---|
| <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# 532878 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

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

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Examiner's Initials

**ARTICLES OF ORGANIZATION  
OF  
COMPASS HEALTH CARE CONSULTING, LLC**

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ARTICLE I - Name:

The name of the Limited Liability Company is COMPASS HEALTH CARE CONSULTING, LLC (the "Company").

ARTICLE II - Address:

The mailing address and street address of the principal office of the Company is 1065 N. E. 125th Street, #409, North Miami, Florida 33161.

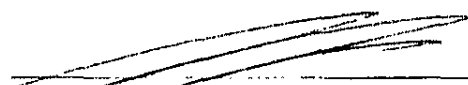
ARTICLE III - Registered Agent:

The street address of the initial registered office of the Company shall be is 1065 N. E. 125th Street, #409, North Miami, Florida 33161, and the name of the initial registered agent of the Company at that address is Dawn Steinberg.

ARTICLE IV - Management:

The Company is to be manager managed.

**IN WITNESS WHEREOF**, the undersigned, pursuant to laws of the State of Florida, has executed these Articles of Organization as of 10/29, 2009.

  
\_\_\_\_\_  
Scott D. Segal, M.D., Authorized Signatory

## STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent as provided for in Chapter 608, F.S.*

  
Dawn Steinberg

Dated: 10/29, 2009