

Florida Department of State
Division of Corporations
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.

((H09000259081 3)))



H090002590813ABC1

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 : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.
Account Number : 075410002172
Phone : (239)344-1100
Fax Number : (239)344-1200

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

FLORIDA/FOREIGN LIMITED LIABILITY CO.
STEVEN S. GOLDBERG, M.D., P.L.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

M. THOMAS

DEC 17 2009

EXAMINER

RECEIVED

09 DEC 16 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC 16 AM 10:34

FILED

FAX AUDIT # H09000259081 3

**ARTICLES OF ORGANIZATION
OF
STEVEN S. GOLDBERG, M.D., P.L.**

**ARTICLE I
NAME**

*The name of the limited liability company shall be STEVEN S. GOLDBERG, M.D., P.L.
(the "Company").*

**ARTICLE II
MAILING ADDRESS AND STREET ADDRESS**

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

Physicians Regional Medical Center
Desk 33/34
6101 Pine Ridge Road
Naples, Florida 34119

**ARTICLE III
INITIAL REGISTERED AGENT AND OFFICE**

The name and street address of the initial registered agent of the Company are:

Steven S. Goldberg, M.D.
Physicians Regional Medical Center
Desk 33/34
6101 Pine Ridge Road
Naples, Florida 34119

**ARTICLE IV
PURPOSE**

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the state of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FAX AUDIT # H09000259081 3

\\ODMA\PCDOCS\DOCS\1749128\1

FILED
2009 DEC 16 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT # H09000259081 3

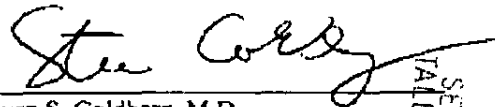
**ARTICLE V
DURATION**

The Company shall exist from the date of filing these Articles of Organization with the Department of State and shall be dissolved upon the occurrence of any event of dissolution as described in the Operating Agreement of the Company.

**ARTICLE VI
OPERATING AGREEMENT**

The Member shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

IN WITNESS WHEREOF, the undersigned, being an Authorized Representative of the Company, has executed these Articles of Organization, this 16th day of DECEMBER, 2009.



Steven S. Goldberg, M.D.
Authorized Representative

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC 16 AM 10:34

FILED

FAX AUDIT # H09000259081 3

FAX AUDIT # H09000259081 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 in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is "STEVEN S. GOLDBERG, M.D., P.L."
2. The name and address of the registered agent and office are:

Steven S. Goldberg, M.D.
Physicians Regional Medical Center
Desk 33/34
6101 Pine Ridge Road
Naples, Florida 34119

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.


Steven S. Goldberg, M.D., Registered Agent

2009 DEC 16 AM 10:34
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT # H09000259081 3