

L09000126831

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.

(((H09000262325 3)))



H090002623253ABC3

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 1200000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

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

Email Address: _____

RECEIVED
09 DEC 21 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.
VIA SANTAS, LLC

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

FILED
09 DEC 21 AM 8:08
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filings Menu

Help

T. HAMPTON
EXAMINER

FROM : LAZARUS

FAX NO. : 3052201440

Dec. 21 2009 05:30PM P2

H09000262325

ARTICLES OF ORGANIZATION

OF

FLORIDA LIMITED LIABILITY COMPANY

The undersigned hereby subscribes to these Articles of Organization for the purpose of forming a Florida limited liability company pursuant to Florida status, chapter 608

ARTICLE I

The name of the limited liability Company is:

VIA SANITAS, LLC

ARTICLE II

The street address and street address of the principal office of the limited liability company is:

**3860 SW 8TH ST STE 200
CORAL GABLES, FL 33134**

The mailing address and street address of the principal office of the limited liability company is:

**3860 SW 8TH ST STE 200
CORAL GABLES, FL 33134**

ARTICLE III

The purpose for which this limited liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV

The registered agent and the street address of the initial registered agent of this limited liability company in the state of Florida shall be:

**BERNARDO SARUSKI
3860 SW 8TH STREET SUITE 200
CORAL GABLES, FL 33134**

H09000262325

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC 21 AM 0:08

FROM : LAZARUS

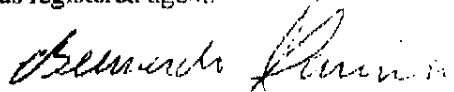
FAX NO. : 3052201440

Dec. 21 2009 05:30PM P3

H09000262325

Having been named as registered agent and to accept service of process for the above named 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 duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: BERNARDO SARUSKI



ARTICLE V

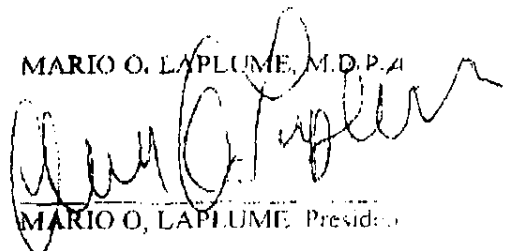
MANAGER (S) or MANAGING MEMBER (S)

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
Manager:	MARIO O. LAPLUME 90 SW 8 TH STREET SUITE 251 MIAMI, FL 33130

IN WITNESS WHEREOF, the undersigned, has executed the foregoing Articles of Organization as of the 21th day of December, 2009

MARIO O. LAPLUME, M.D.P.A.



MARIO O. LAPLUME President

(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.)

H09000262325

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC 21 AM 8:08