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B. KOHR

DEC 28 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 22, 2009

SUSIE KNIGHT  
CSC  
TALLAHASSEE, FL

SUBJECT: TERI CUMPTON, M.D., P.L.  
Ref. Number: W09000055361

**RESUBMIT**

Please give original  
submission date as file date.

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We have received your document for TERI CUMPTON, M.D., P.L. and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The Articles must state the specific professional practice in which the company will engage. Something such as "The company will engage in the practice of medicine." will be sufficient.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Regulatory Specialist II

Letter Number: 609A00038902

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228709



CORPORATION SERVICE COMPANY

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ACCOUNT NO. : I20000000195

REFERENCE : 228704 7332376

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : December 22, 2009

ORDER TIME : 12:37 PM

ORDER NO. : 228704-005

CUSTOMER NO: 7332376

**RESUBMIT**

Please give original  
submission date as file date.

DOMESTIC FILING

NAME: TERI CUMPTON, M.D., P.L.

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: \_\_\_\_\_

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**ARTICLES OF ORGANIZATION  
OF TERI CUMPTON, M.D., P.L.**

**Article I**

**Name.** The name of this Florida Limited Liability Company is **TERI CUMPTON, M.D., P.L.** and is organized for the purpose of providing professional medical services.

**Article II**

**Principal Office and Mailing Address.** The principal place of business and mailing address of this Professional Limited Liability Company shall be 2050 Laurel Run Drive, Ocala, Florida 34471.

**Article III**

**Registered Agent.** The street address of the initial registered office of this Limited Liability Company is Folds & Walker, LLC, 527 East University Avenue, Gainesville, Florida 32602, and the name of the initial registered agent of this Limited Liability Company is Tosha D. Fernandez, Esquire.

*Tosha D. Fernandez*

I, *S. Scott Walker, Esq.*, hereby accept the appointment as registered agent for **TERI CUMPTON, M.D., P.L.** I am familiar with and accept the obligations of that position as provided for in Chapter 608 of the Florida Statutes.

*Tosha D. Fernandez*  
S. Scott Walker, Esquire  
*Tosha D. Fernandez*

**STATE OF FLORIDA  
COUNTY OF ALACHUA**

The foregoing instrument was acknowledged before me this 22<sup>nd</sup> day of December, 2009 by Tosha D. Fernandez, Esq., who is personally known to me and who did not take an oath.

*Stephanie Reyes*  
Notary Public, State of Florida  
My Commission Expires



**Article IV**

**Managing Member.** The name and address of the initial Managing Member is Teri Cumpton, M.D., whose address is 2050 Laurel Run Drive, Ocala, Florida 34471.

IN WITNESS WHEREOF, the undersigned Managing Member has executed these Articles of Organization this 22 day of December, 2009.

*Teri Cumpton, M.D.*  
Teri Cumpton, MD  
Managing Member

**STATE OF Texas  
COUNTY OF Brazos**

The foregoing instrument was acknowledged before me this 22<sup>nd</sup> day of December, 2009 by Teri Cumpton, MD, who is personally known to me or who has produced Teri Cumpton as identification and who did not take an oath.

*Courtney Jasso*  
Notary Public, State of Texas  
My Commission Expires: April 7, 2011

