

Division of Corporations

1 of 1

L10000022694

**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.

(((H10000046534 3)))



H100000465343ABCX

RECEIVED
10 MAR -1 PM 2:46

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**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 : COHEN, CHASE, HOFFMAN & SCHIMMEL, P.A.
Account Number : 102450002676
Phone : (305) 670-0201
Fax Number : (305) 670-6152

****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.
MIAMI NEUROLOGIC CENTRE, LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 02 |
| Estimated Charge | \$155.00 |

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR -1 AM 8:22**

Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON

MAR - 2 2010

EXAMINER

H10000046534

ARTICLES OF ORGANIZATION
OF
MIAMI NEUROLOGIC CENTRE, LLC

ARTICLE I - NAME

The name of this Limited Liability Company is MIAMI NEUROLOGIC CENTRE, LLC.

ARTICLE II - EXISTENCE

The existence of this Company shall commence on the day of filing these Articles of Organization. The duration of the Company shall be perpetual.

ARTICLE III - PRINCIPAL OFFICE

The Company's principal office shall initially be located at 9485 SW 72 Street, A-195, Miami, FL 33173. The Company's mailing address shall, initially, be located at the same address.

ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Company and the name of the initial registered agent of this Company at such address are as follows:

REGISTERED AGENT

Paul A. Lester, P.A.

STREET ADDRESS OF
REGISTERED OFFICE

9400 S. Dadeland Blvd., Suite 600
Miami, Florida 33156

ARTICLE V - MANAGEMENT

The Company shall be a member managed limited liability company. The initial manager is:

MANAGER

Michael Aptman

ADDRESS

9485 SW 72 Street, A-195
Miami, FL 33173

H10000046534

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR - 1 AM '02


H10000046534

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.



Paul A. Lester, Agent for Member

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, I hereby accept the appointment as registered agent and agree to act in that 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 as provided for in Florida Statutes, Chapter 608.



Paul A. Lester, Registered Agent

F:\Users\PALESTER\FILES\APTMAN\Articles.wpd

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR -1 AM 10:24

H10000046534