

L100000574087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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A. LUNT

JUL 14 2010

EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUL 13 AM 11:04

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 11, 2010

ISOBEL P. CORDERO
7210 BOUNTY DRIVE
SARASOTA, FL 34231

SUBJECT: IPC ANESTHESIA, PLLC
Ref. Number: W10000028028

We have received your document for IPC ANESTHESIA, PLLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 010A00014488

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IPC ANESTHESIA, PLLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ISOBEL P. CORDERO

Name of Person

Firm/Company

7210 BOUNTY DRIVE

Address

SARASOTA, FL 34231

City/State and Zip Code

isobelpc@earthlink.net

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

ISOBEL P. CORDERO

Name of Person

at (443) 553-9097

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IPC ANESTHESIA, PLLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

ISOBEL P. CORDERO, CRNA
7210 BOUNTY DRIVE
SARASOTA, FL 34231

Mailing Address:

ISOBEL P. CORDERO, CRNA
7210 BOUNTY DRIVE
SARASOTA, FL 34231

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ISOBEL P. CORDERO, CRNA
Name

7210 BOUNTY DRIVE

Florida street address (P.O. Box **NOT** acceptable)

SARASOTA FL 34231

City, State, and Zip

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TALLAHASSEE, FLORIDA

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 as provided for in Chapter 608, F.S.

Isobel P. Cordero

Registered Agent's Signature (REQUIRED)

(CONTINUED)

IPC Anesthesia, PLLC, an independent business entity seeks to provide anesthetic services which includes General, Regional and Conscious Sedation in collaboration with, and /or under the personal direction of an Anesthesiologist/ Physician, to Hospitals, Same Day Surgery Centers, and Clinics.

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

ISOBEL P. CORDERO, CRNA
7210 BOUNTY DRIVE
SARASOTA, FL , 34231

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CLERK OF STATE
TALLAHASSEE FLORIDA

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JUNE 15, 2010. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Isobel P. Cordero, CRNA

Signature of a member or an authorized representative of a member.

(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.)

ISOBEL P. CORDERO, CRNA

Typed or printed name of signer

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)