

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.

(((H11000027012 3)))



H110000270123ABCO

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:

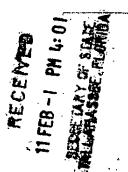
Account Name : CSH SERVICES, LLC

Account Number : I20070000160 : (800)494-3124 Phone

Fax Number : (561)455-9885

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

Email Address:



FLORIDA LIMITED LIABILITY CO.

Turnbull Physician Assistant Services, LLC

Certificate of Status	C SANGE CONTRACTOR OF STREET
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

T. CLINE

FEB - 2 2011

EXAMINER

H11000027012 3

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

TURNBULL PHYSICIAN ASSISTANT SERVICES, LLC

ARTICLE II ADDRESS

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

1400 TALLWOOD AVENUE #204 HOLLYWOOD, FLORIDA 33021

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

MELISSA TURNBULL 1400 TALLWOOD AVENUE #204 HOLLYWOOD, FLORIDA 33021

Having been named as registered agent 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.

MELISSA TURNBULL / Registered Agent's signature

H11000027012 3

PAGE 2 TURNBULL PHYSICIAN ASSISTANT SERVICES, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
MELISSA TURNBULL
1400 TALLWOOD AVENUE #204
HOLLYWOOD, FLORIDA 33021

RETARY OF STALL LORISA

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.

MELISSA TURNBULL