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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

EFFECTIVE DATE 05-07-11

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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

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FLORIDA LIMITED LIABILITY CO.
Concierge Medicine of Florida, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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TALLAHASSEE, FLORIDA

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11 MAY -3 AM 8:24

FILED

B. BOSTICK
MAY - 4 2011

EXAMINER
MAY 13 3:15 PM

ARTICLES OF ORGANIZATION

Article I. Name

The name of this Florida limited liability company is:
Concierge Medicine of Florida, LLC

Article II. Address

The street and mailing address of the Company's initial principal office is:
Concierge Medicine of Florida, LLC
4745 Sutton Park Court
Suite 711
Jacksonville FL 32224

Article III. Registered Agent

The name and street address of the Company's registered agent is:
Arthur Hernandez, Esq.
2223 Oak Street
Jacksonville FL 32204

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TALLAHASSEE, FLORIDA

Article IV. Transferability of Membership Interests

No members shall have the right to assign their membership interests in the Company without the written agreement of all of the membership interests, unless otherwise provided in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in the management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was entitled, to the extent assigned.

Arthur Hernandez, P.A.
2223 Oak Street
Jacksonville FL 32204
904.389.6989

Article V. Distribution of Profits

Unless otherwise provided in the Company's Operating Agreement, there shall not be any distribution of profits unless each separate distribution is approved by the affirmative vote of members who own more than 50% of the voting interest in the Company. The voting members shall have complete discretion on when and if to approve any distribution of profits.

Article VI. Management

This will be a manager-managed company. The name and address of each manager is:

Catherine C. Madaffari
4745 Sutton Park Court Suite 711
Jacksonville FL 32224
Arthur Hernandez
4745 Sutton Park Court Suite 711
Jacksonville FL 32224

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Article VII. Company Existence

The Company's existence shall begin effective as of May 7, 2011.

The undersigned authorized representative of a member executed these Articles of Organization on 5/3/2011.


ARTHUR HERNANDEZ, P.A.

by Kristine Roy as attorney-in-fact

Arthur Hernandez, P.A.
2223 Oak Street
Jacksonville FL 32204
904.389.6989

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STATEMENT OF REGISTERED AGENT

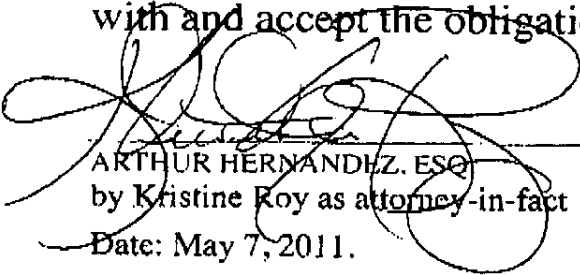
LIMITED LIABILITY COMPANY:

Concierge Medicine of Florida, LLC

REGISTERED AGENT/OFFICE:

Arthur Hernandez, Esq.
2223 Oak Street
Jacksonville FL 32204

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.


ARTHUR HERNANDEZ, ESQ.
by Kristine Roy as attorney-in-fact
Date: May 7, 2011.

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