

L11000140292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

B. KOHR

DEC 14 2011

EXAMINER

B. KOHR

DEC 14 2011

EXAMINER



200215095572

12/14/11--01023--003 **125.00

NOT RETURNED
TO AGENCY
SUFFICIENCY OF FILING

RECEIVED
DEC 14 AM 11:21

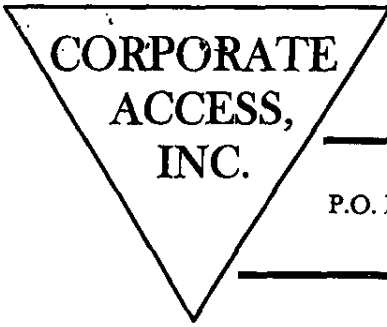
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

EFFECTIVE DATE

1/1/2012

FILED
DEC 14 PM 1:40

SECRETARY OF STATE
DIVISION OF CORPORATIONS



"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP:

12/14 Emily

- ☐ CERTIFIED COPY
☒ PHOTOCOPY
☐ CUS
☒ FILING

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 14 PM 1:40

EFFECTIVE DATE 1/1/2012

1. Community Lung Screening Services of Florida, LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

★ Effective 1/1/12 ★

EFFECTIVE DATE 1/1/2012

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 14 PM 1:40

ARTICLES OF ORGANIZATION
OF
COMMUNITY LUNG SCREENING SERVICES OF FLORIDA, LLC

The undersigned hereby certifies that he is the Authorized Representative of the Member who is forming a Limited Liability Company under Florida Statutes Chapter 608. The following Articles of Organization are hereby adopted.

ARTICLE 1.
NAME

The name of the Limited Liability Company shall be Community Lung Screening Services of Florida, LLC.

ARTICLE 2.
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as of January 1, 2012.

ARTICLE 3.
ADDRESS; PRINCIPAL OFFICE

The mailing address of the Limited Liability Company and the street address of the principal office of the Limited Liability Company is 509 South Armenia Avenue, Suite 200, Tampa, Florida 33609.

ARTICLE 4.
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 360 Central Avenue, Suite 1200, St. Petersburg, Florida 33701 and its initial registered agent at such address is Joel D. Bronstein.

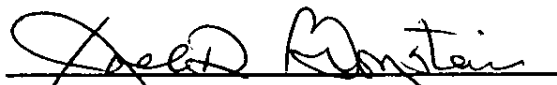
ARTICLE 5.

PURPOSE

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

The undersigned, being the Authorized Representative of the Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of Community Lung Screening Services of Florida, LLC.

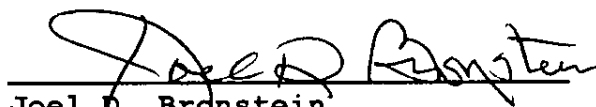
Executed by the undersigned on December 13, 2011.


Joel D. Bronstein
Authorized Representative

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT
ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 608.415, Florida Statutes, I agree to act in the capacity of Registered Agent for Community Lung Screening Services of Florida, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 608.415, Florida Statutes.

DATED this 13th day of December, 2011.


Joel D. Bronstein