#112000046779

| (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: |
| |
| |
| |
| |
| |
| |





600226964176

FECTIVE DATE

04/04/12--01005--019 **125.00

TO APR -4 AM 10: 36

FILED'S

12 APR -4 AM 8: 50

BECRETARY OF STATE
ALLAHASSEE, FLORID

K. SALY EXAMINER APR 5 2012

CORPORATE ACCESS, INC.

"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: 49 and | |
| | | CERTIFIED COPY | |
| | | PHOTOCOPY | |
| | | CUS | |
| | | FILING P.L. | |
| | | | |
| | 1 | FDSCS MEMBER I, P.L. ORPORATE NAME AND DOCUMENT#) | |
| | (CC | ORPORATE NAME AND DOCUMENT #) | |
| • | 100 | ORPORATE NAME AND DOCUMENT #) | |
| | 100 | ORI ORATE NAME AND DOCUMENT #) | |
| • | -(CC | ORPORATE NAME AND DOCUMENT #) | |
| | , | | |
| , | (CC | ORPORATE NAME AND DOCUMENT #) | |
| | (00. | | |
| | <u>(CC</u> | ORPORATE NAME AND DOCUMENT #) | |
| | (00 | | |
| | -(CC | ORPORATE NAME AND DOCUMENT #) | |
| PEC | | NSTRUCTIONS: | |
| | | | |
| | | | |
| | | | |

EFFECTIVE DATE

ARTICLES OF ORGANIZATION OF

FILED 12 APR -4 AM 8: 50

FDSCS MEMBER I, P.L.

The undersigned hereby certifies that he is the Authorized Authori

ARTICLE I.

The name of the Professional Limited Liability Company shall be FDSCS MEMBER I, P.L.

ARTICLE II. DURATION; EFFECTIVE DATE

This Professional Limited Liability Company shall exist perpetually commencing as of April 2, 2012.

ARTICLE III. ADDRESS; PRINCIPAL OFFICE

The mailing address of the Professional Limited Liability Company and the street address of the principal office of the Limited Liability Company is 4915 Ehrlich Road, Tampa, Florida 33624.

ARTICLE IV.

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Professional Limited Liability Company is 360 Central Avenue, Suite 1200, St. Petersburg, Florida 33701 and the name of its initial registered agent at such address is Thomas B. Smith.

ARTICLE V. PURPOSE

This Professional Limited Liability Company is organized for the purpose of owning a membership interest in Florida Dermatology and Skin Cancer Specialists, P.L., a Florida professional limited liability company and to operate a group medical practice through Florida Dermatology and Skin Cancer Specialists, P.L. along with such other activity or business permitted under the laws of the United States of America and of this State as the Members may determine.

ARTICLE VI RESTRICTIONS ON MEMBERSHIP; RIGHT TO ADMIT ADDITIONAL MEMBERS

Members must be licensed to practice medicine or osteopathy in the State of Florida. A member's interest in the Professional Limited Liability Company may not be sold or otherwise transferred except to a person licensed to practice medicine or osteopathy in the State of Florida and only in accordance with the provisions of the Operating Agreement of this Professional Limited Liability Company.

The undersigned, being the Authorized Representative of one of the Members of the Professional Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of FDSCS MEMBER I, P.L.

Executed by the undersigned on April 2, 2012.

AUTHORIZED REPRESENTATIVE OF A MEMBER

Thomas B. Smith

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Chapter 621, Florida Statutes, I agree to act in the capacity of Registered Agent for FDSCS MEMBER I, P.L. 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 2nd day of April, 2012.

Thomas B. Smith