

L12000150693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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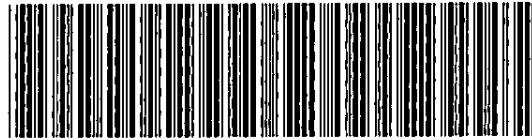
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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SUFFICIENCY OF FILING

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12 NOV 30 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LLC

1. Bayfront Neurotrauma Providers,
(CORPORATE NAME AND DOCUMENT #)

LLC

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:

APPROVED
AND
FILED
12 NOV 30 PM 12:59
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

Articles of Organization
of
BAYFRONT NEUROTRAUMA PROVIDERS, LLC

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

ARTICLE 1.
NAME

The name of the Limited Liability Company shall be BAYFRONT NEUROTRAUMA PROVIDERS, LLC.

ARTICLE 2.
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as of November 27, 2012.

ARTICLE 3.
MAILING ADDRESS; PRINCIPAL OFFICE

The mailing and street address of the principal office of the Limited Liability Company shall be 603 7th Street South, Suite 540 St. Petersburg, FL 33701.

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 the name of the registered agent is Thomas B. Smith.

ARTICLE 5.
PURPOSE

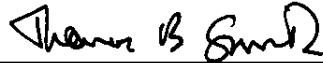
This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.

APPROVED
AND
FILED

12 NOV 30 PM 5:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, being the Authorized Representative of one of the Members of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of BAYFRONT NEUROTRAUMA PROVIDERS, LLC.

Executed by the undersigned on November 29, 2012.

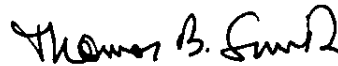


Thomas B. Smith

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 BAYFRONT NEUROTRAUMA PROVIDERS, 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 November 29, 2012.



Thomas B. Smith

222953

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA