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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)	600242992026 34 500 500 500 500 500 500 500 500 500 500
(Business Entity Name)	02/14/1301005017 **155.00
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CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

. .___ ___

CONTACT: <u>RICKY SOTO</u>

DATE: <u>02/13/2013</u>

REF. #: 000650.180980

CORP. NAME: <u>DR. WENTWORTH JARRETT, L.L.C.</u>

() ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT

() FOREIGN QUALIFICATION

() ANNUAL REPORT

() REINSTATEMENT

() TRADEMARK/SERVICE MARK

() LIMITED PARTNERSHIP

() MERGER

() FICTITIOUS NAME (XX) LIMITED LIABILITY () WITHDRAWAL

() ARTICLES OF DISSOLUTION

FED 13 RM 103

-

- () CERTIFICATE OF CANCELLATION
- () OTHER:

STATE FEES PREPAID WITH CHECK# (ひつやい) FOR \$ 155.00	STATE FEES PREPAID	WITH CHECK#	103405	FOR \$ 155.00
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AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$_____

PLEASE RETURN:

(XX) CERTIFIED COPY () CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

Examiner's Initials

DR. WENTWORTH JARRETT, P.A. 12955 SW 132ND STREET BLDG.3B, SUITE 104 MIAMI, FL 33186

ţ,

January 24, 2013

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Formation of Dr. Wentworth Jarrett, L.L.C.

Dear Sir or Madam:

The undersigned, as President of Dr. Wentworth Jarrett, P.A., a Florida professional corporation, registered under Document Number P02000100592, hereby authorizes use of the name "Dr. Wentworth Jarrett, L.L.C.", by a to-be-formed Florida limited liability company filing Articles of Organization in Florida. Any potential name conflicts are hereby waived.

Thank you.

Sincerely,

Dr. Wentworth Jarrett, P.A., a Florida professional corporation Document Number P02000100592

By:

Wentworth-Jarrett, M.D., President

[7]

ARTICLES OF ORGANIZATION OF DR. WENTWORTH JARRETT, L.L.C.

1

ARTICLE I Name

The name of the Limited Liability Company is Dr. Wentworth Jarrett, L.E.C. (the "Company").

ARTICLE II Address

The mailing address and the street address of the principal office of the Company is 12955 SW 132nd Street, Bldg. 3B, Suite 104, Miami, Florida 33186-6224.

ARTICLE III Registered Agent

The name of the Company's registered agent in the State of Florida is Wentworth Jarrett, M.D. and the address of the Company's registered office is 12955 SW 132nd Street, Bldg. 3B, Suite 104, Miami, Florida 33186-6224.

ARTICLE IV Duration

The period of duration for the Company shall be perpetual.

ARTICLE V Management

The Company is to be a member-managed company and the name and address of the initial member is:

PrimeHealth Physicians, LLC 9045 SW 87th Court Miami, Florida 33176

ARTICLE VI Admission of Additional Members

Members shall have the right to admit additional members as provided by the Florida Limited Liability Company Act by a vote of a majority-in-interest of the members.

ARTICLE VII Members' Rights to Continue Business

The death, retirement, resignation, expulsion, dissolution, bankruptcy, dissociation or withdrawal of any member, or the occurrence of any other event that terminates the continued membership of any member shall not cause the Company to be dissolved or its affairs to be wound-up, and upon the occurrence of any such event, the Company shall be continued without dissolution and without any affirmative action or requirement on the part of the members.

MEMBER:

PrimeHealth Physicians, LLC, a Florida limited liability company

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[77]

By: . Saavedra, M.D., Member Diego

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.407 OR 608.415, FEORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is Dr. Wentworth Jarrett, L.L.C.

 The name and address of the registered agent and office is: Wentworth Jarrett, M.D., 12955 SW 132nd Street, Bldg. 3B, Suite 104, Miami, Florida 33186-6224.

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.

Wentworth Jarrett, M.D.