

Jun. 12. 2013 10: 8 AM
Division of Corporation

Gray Robinson

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L13000085/23

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

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : 120010000078
Phone : (407) 843-8880
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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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DPM of Florida, LLC (6/12/13)

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June 12, 2013

GRAYROBINSON, P.A. - ORLANDO

SUBJECT: DPM OF FLORIDA, LLC
REF: W13000033927

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co.". The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is #L05000097998, DPM, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

8 Jun. 12. 2013 10:58AM Gray Robinson: 20:51 AM PAGE 2/002 Fa No. 1659, ver P. 3

Joey Bryan
Regulatory Specialist II

FAX Aud. #: 813000132248
Letter Number: 213A00014685

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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TALLAHASSEE, FLORIDA

ARTICLE I
Name

The name of this Limited Liability Company is:

DPM of Central Florida, LLC

ARTICLE II
Address

The mailing address and the street address of the principal office of this Limited Liability Company is:

10450 SAVANNAH RIDGE LANE
WINTER GARDEN, FLORIDA 34787

ARTICLE III
Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV
Initial Board of Managers

This Limited Liability Company shall have one (1) manager initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be less than one.

The names and addresses of the initial managers of this Limited Liability Company are as follows:

Name

Street Address

GHASSAN KALOTI

10450 SAVANNAH RIDGE LANE
WINTER GARDEN, FL. 34787

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ARTICLE V

Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

GHASSAN KALOTI
10450 SAVANNAH RIDGE LANE
WINTER GARDEN, FL 34787

Having been appointed as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, I hereby accept this appointment and agree to serve this Limited Liability Company in this capacity. I am familiar with and accept the obligations of my position as the registered agent for this Limited Liability Company, as provided for in Chapter 608, Florida Statutes.


REGISTERED AGENT'S SIGNATURE

In accordance with Section 608.408(3), *Florida Statutes*, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


AUTHORIZED REPRESENTATIVE'S SIGNATURE

GHASSAN KALOTI

Type or printed name of signer

FILING FEES:

\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)

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