11300091119

(Re	equestor's Name)	
(Ac	ldress)	
. (Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		į

Ļ

Office Use Only



600248590476

06/24/13--01014--032 **155.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JN 24 PM 3: 21

JUN 25 2013 J. BRYAN

Attorney Kevin Downey, P.A.

2631 N.W. 41st STREET, SUITE B-2 GAINESVILLE, FLORIDA 32606 (352) 373 - 4554 Fax: (352) 338-1229 kidowney@bellsouth.net

June 20, 2013

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

Re:

Morelli Draganov, LLC



Gentlemen:

I am enclosing herewith an original and a copy of the Articles of Organization for the above named limited liability company. In addition, a check in the sum of \$155.00 is enclosed which represents the following fees:

Filing Fee	\$125.00
Certified Copy	\$ <u>30.00</u>

Total \$<u>155.00</u>

Please file the original of the enclosed Articles of Organization and return a certified copy to the undersigned.

Your prompt attention to this matter is appreciated.

Kevin I. Downey

Sincerely,

Enclosures

ARTICLES OF ORGANIZATION

OF

Morelli Draganov, LLC



The undersigned person, acting hereby as Organizer for the purpose of forming a limited liability company under the Florida Statutes, Chapter 608, hereby executes the following Articles of Organization:

- I NAME. The name of the limited liability company shall be: Morelli Draganov, LLC ("Company").
- II ADDRESS. The address of the principal office of the Company shall be 9265 SW 31st Place, Gainesville, Florida 32608.
- III DURATION. The Company shall commence its existence upon execution of these Articles of Organization. The Company's existence shall be perpetual, unless the Company is dissolved as provided in these Articles of Organization.
- IV REGISTERED OFFICE AND AGENT. The name of the registered agent of the Company in the State of Florida is Giuseppe Morelli, M.D., and the street address of the registered office of the Company is 9265 SW 31st Place, Gainesville, Florida 32608.
- V CAPITAL CONTRIBUTIONS. The members of the Company shall contribute to the capital of the Company in cash or property. Each member shall make additional capital contributions to the Company only upon the unanimous consent of all the members.
- VI ADMISSION OF NEW MEMBERS. No additional members shall be admitted to the Company without the written consent of all the members of the Company and upon such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all of the members of the Company, other than the member proposing to dispose of his or her interest, approves of the proposed transfer by written consent.
- VII TERMINATION OF EXISTENCE. The Company shall be dissolved upon the death, bankruptcy, or dissolution of a member or manager, or upon the occurrence of any other event that terminates the continued membership of a member in the Company. However, the business of the Company may be continued by the consent of all the remaining members.
- VIII MANAGEMENT. The Company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the Company. These regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization.

IN WITNESS WHEREOF, the undersigned organizer has executed these Articles of Organization on this 20 day of June 2013.

Giuseppe Morelli, M.D., Organizer

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

Dated: June 20, 2013

Giuseppe Morelli, M.D., Registered Agent

FILED 2013 JUN 24 PM 3: 21 SECRETARY OF STATE SECRETARY OF STATE