

JUL-26-2013 FRI 05:36 PM

Division of Corporations

U3000106920

P. 01

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000167432 3)))



H130001674323ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAW OFFICES OF PAUL A. LESTER, P.A.
Account Number : I20110000058
Phone : (305) 350-5344
Fax Number : (305) 373-2294

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: PALESQ@GMAIL.COM

**FLORIDA LIMITED LIABILITY CO.
SOUTH MIAMI SPINE AND WELLNESS LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

RECEIVED

13 JUL 29 AM 6:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JUL 29 AM 8:05

FILED

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

H13000167432

FILED
2013 JUL 29 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
SOUTH MIAMI SPINE AND WELLNESS LLC

ARTICLE I - NAME

The name of this Limited Liability Company is SOUTH MIAMI SPINE AND WELLNESS LLC.

ARTICLE II - EXISTENCE

The existence of this Company shall commence on the day of filing these Articles of Organization. The duration of the Company shall be perpetual.

ARTICLE III - PRINCIPAL OFFICE

The Company's principal office shall initially be located at 9150 South Dadeland Boulevard, Suite 1400, Miami, Florida 33156. The Company's mailing address shall, initially, be located at the same address.

ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Company and the name of the initial registered agent of this Company at such address are as follows:

<u>REGISTERED AGENT</u>	<u>STREET ADDRESS OF REGISTERED OFFICE</u>
Law Offices of Paul A. Lester, P.A.	9150 S. Dadeland Boulevard, Suite 1400 Miami, Florida 33156

ARTICLE V - MANAGEMENT

The Company shall be a manager managed limited liability company. The initial manager is:

<u>MANAGER</u>	<u>ADDRESS</u>
Elliott C. Grusky	9150 South Dadeland Boulevard, Suite 1400 Miami, Florida 33156

H13000167432

H13000167432

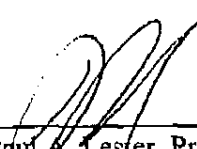
In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



Paul A. Lester, Agent for Member

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, I hereby accept the appointment as registered agent and agree to act in that 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 as provided for in Florida Statutes, Chapter 608.

Law Offices of Paul A. Lester, P.A.

By: 

Paul A. Lester, President
Registered Agent

P:\FILE\BOKU\KY, BLDG\ARTICLES OF ORGANIZATION SOUTH MIAMI SPINE AND WELLNESS, LLC.DOC

FILED
2013 JUL 29 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H13000167432