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Division of Corporations

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : REZNICSEK, FRASER, WHITE, & SHAFFER, P.A.
Account Number : I20030000107
Phone : (904) 567-1060
Fax Number : (904) 567-1065

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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FLORIDA LIMITED LIABILITY CO.
Gainesville ENT & Allergy Associates, LLC

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December 26, 2013

FLORIDA DEPARTMENT OF STATE

REZNICSEK, FRASER, WHITE, & SHAFFER, P.A.
Division of CorporationsSUBJECT: GAINESVILLE ENT & ALLERGY ASSOCIATES, LLC
REF: W13000068622

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 letter submitted as consent is illegible. Please submit a legible copy.

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.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H13000274865
Letter Number: 013A00029057

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TALLAHASSEE, FLORIDA



GAINESVILLE
ENT & ALLERGY
ASSOCIATES

7135 NW 11th Place
Suite A
Gainesville, FL 32605

(352) 331-0090

Fax: (352) 331-0094

www.gainesville-entandallergy.com

December 18, 2013

Via Facsimile

Florida Department of State
Division of Corporations

Re: Authorization for Filing Similar Name

Dear Sir or Madam:

The undersigned, being President of Gainesville ENT & Allergy Associates, P.A. hereby authorizes the use and filing of a similar name of Gainesville ENT & Allergy Associates, LLC. Please accept this letter as your authorization to file the Articles of Organization for Gainesville ENT & Allergy Associates, LLC.

Thank you for your assistance in this matter.

Sincerely,

GAINESVILLE ENT & ALLERGY
ASSOCIATES, P.A.

By: _____

Jeremy Melker, M.D.

Its: _____

President

FILED
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TALLAHASSEE, FLORIDA

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EFFECTIVE DATE
1-1-2014

**ARTICLES OF ORGANIZATION
OF
GAINESVILLE ENT & ALLERGY ASSOCIATES, LLC**

Pursuant to section 608.407 of the Florida Limited Liability Company Act, Florida Statutes, as amended from time to time (the "Act"), the following are adopted as the Articles of Organization of the limited liability company organized hereby:

**ARTICLE I
NAME**

The name of the limited liability company is Gainesville ENT & Allergy Associates, LLC (the "Company").

**ARTICLE II
EFFECTIVE DATE AND DURATION**

The effective date upon which this Company shall come into existence shall be January 1, 2014. Unless earlier terminated pursuant to the Act or the Operating Agreement (as defined in § 608.402 (24) of the Act) of the Company, the period of its duration shall be perpetual.

**ARTICLE III
ADDRESS**

The mailing and street address of the principal office of the Company shall be 11945 San Jose Boulevard, Building 300, Jacksonville, Florida 32223.

**ARTICLE IV
REGISTERED AGENT AND OFFICE**

The initial registered office of the Company shall be 11945 San Jose Boulevard, Building 300, Jacksonville, Florida 32223, and its initial registered agent at such office shall be John Berlin.

**ARTICLE V
MANAGEMENT OF THE COMPANY**

The Company will be managed by one or more managers in accordance with and subject to the requirements of the Act and Operating Agreement of the Company. The name and street address of the sole manager of this Company is:

Name
North Florida Surgeons, P.A.

Address
11945 San Jose Boulevard, Building 300
Jacksonville, Florida 32223

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IN WITNESS WHEREOF, the undersigned members of the Company have executed these Articles of Organization on behalf of the Company in accordance with § 608.407 of the Act.

Dated this 13th day of December, 2013.

North Florida Surgeons, P.A.
Its: Sole Member

By: 
Paul Chappano, M.D., President

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**CERTIFICATE DESIGNATING REGISTERED OFFICE
AND
REGISTERED AGENT FOR THE SERVICE OF PROCESS
WITHIN FLORIDA**

In compliance with Chapter 608, Florida Statutes, as amended from time to time (the "Act"), the following is submitted:

Gainesville ENT & Allergy Associates, LLC, desiring to organize or qualify under the laws of the State of Florida as a limited liability company pursuant to the Act, hereby designates John Berlin as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 11945 San Jose Boulevard, Building 300, Jacksonville, Florida 32223.

Dated this 13th day of December, 2013.

North Florida Surgeons, P.A.
Its: Sole Member

By: Paul Chappano, M.D., President

Having been named as registered agent to accept service of process for the above stated limited liability company, at the place designated in this certificate, I hereby agree to 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 this 13th day of December, 2013.

John Berlin
John Berlin, Registered Agent

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