

L14000065906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

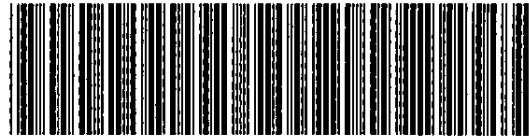
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 23 2014

T. BROWN

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: North Shore Property, LLC**  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jillene Doolkadir, Esq.

Name of Person

NuMedCare, LLC

Firm/Company

4800 N. Federal Hwy., B200

Address

Boca Raton, Florida 33431

City/State and Zip Code

JDoolkadir@NuMedCare.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jillene Doolkadir

Name of Person

at ( 561 )

Area Code

847-3509

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Ref. Number: W14000022636

Teresa Brown  
Division of Corporations  
P.O. Box 6327,  
Tallahassee, Florida 32314

Lauren Bannigan  
NuMedCare, LLC  
4800 N. Federal Hwy. B200  
Boca Raton, Florida 33431

April 15, 2014

**Re:** North Shore Property, LLC

We are hereby resubmitting the attached documents under the name North Shore Property, LLC.

Sincerely,



Lauren Bannigan, Esq.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 9, 2014

JILLENE DOOLKADIR, ESQ.  
NUMEDCARE, LLC  
4800 N FEDERAL HWY B200  
BOCA RATON, FL 33431

SUBJECT: NORTH SHORE PROPERTY, LLC  
Ref. Number: W14000022636

We have received your document for NORTH SHORE PROPERTY, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : NORTH SHORE PROPERTIES, LLC, document number L040000002858.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

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.

Teresa Brown  
Regulatory Specialist II

Letter Number: 214A00007632

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

North Shore Property, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:**

4800 North Federal Highway, Suite B200  
Boca Raton, Florida 33431

**Mailing Address:**

4800 North Federal Highway, Suite B200  
Boca Raton, Florida 33431

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

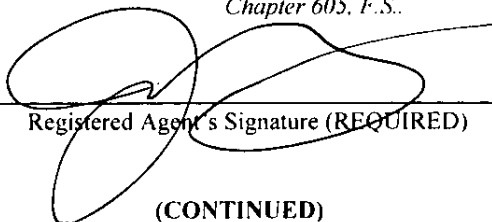
The name and the Florida street address of the registered agent are:

Jillene Doolkadir, Esq  
Name

4800 North Federal Highway, Suite B200  
Florida street address (P.O. Box **NOT** acceptable)

Boca Raton FL 33431  
City Zip

*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 as provided for in Chapter 605, F.S..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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14 APR 22 AM 10:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Todd Stephens

4800 North Federal Highway, Suite B200

Boca Raton, Florida 33431

AMBR

Clifford Carroll

4800 North Federal Highway, Suite B200

Boca Raton, Florida 33431

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0202 (1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jillene Doolkadir, Esq.

Typed or printed name of signee

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**