

Jan. 6. 2016 5:22 PM

01/07 P. 1/6

L14000174063

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.

(((H16000021731 3)))



H160000217313ABCV

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 : BARNETT, BOLT, KIRKWOOD, LONG & KOEHE, P.A.
Account Number : 072731001155
Phone : (813) 253-2020
Fax Number : (813) 251-6711

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FLORIDA PAIN RELIEF GROUP, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$30.00

RECEIVED

2016 JAN 27 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JAN 27 A 8:58

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 28 2016

3 MASON

*H16000021731

**AMENDED AND RESTATED
ARTICLES OF ORGANIZATION
OF
FLORIDA PAIN RELIEF GROUP, LLC**

Pursuant to Section 605.0202 of the Florida Revised Limited Liability Company Act (the "Act"), FLORIDA PAIN RELIEF GROUP, LLC, a Florida limited liability company (the "Company"), hereby delivers these Amended and Restated Articles of Organization, duly executed by the authorized representative of the sole member of the Company, to amend, restate and supersede the original Articles of Organization of the Company, which were filed with the Florida Department of State on November 7, 2014, amended on May 29, 2015, and assigned document number L14000174063.

ARTICLE 1

Name

The name of this professional limited liability company is:

Florida Pain Relief Group, PLLC

(hereafter, the "Company").

ARTICLE 2

Purposes

The Company is formed to engage in every aspect of the practice of medicine. The professional services involved in the Company's practice of medicine may be rendered only through its officers, agents and employees who are duly licensed or otherwise legally authorized to practice medicine in the State of Florida. The Company may also invest its funds in real estate, mortgages, stocks, bonds or any other type of investments, and may own real and personal property necessary for the rendering of such professional services.

FILED
2016 JAN 27 A 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H16000021731

FILED
2016 JAN 27 A 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE 3

Duration

The Company shall have perpetual existence.

ARTICLE 4

Mailing Address and Principal Office

The mailing address of the Company and the street address of its principal office is 4730 N. Habana Avenue, Suite 204, Tampa, Florida 33614.

ARTICLE 5

Initial Registered Office and Agent

The street address of the initial registered office of the Company is 601 Bayshore Boulevard, Suite 700, Tampa, Florida 33606, and the name of the initial registered agent of the Company at that address is DAVID L. KOCHÉ.

ARTICLE 6

Restriction on Alienation of Membership Interests

No member of the Company may sell or transfer all or any portion of such member's membership interest in the Company except to a person who is eligible to be a member of the Company. The foregoing restriction on alienation is not exclusive, and nothing herein shall preclude the imposition of additional restrictions on the transfer of membership interests in the Company pursuant to the regulation, an agreement among the members of the Company or an agreement between the members and the Company.

ARTICLE 7

Forfeiture Upon Occurrence of Disqualifying Event

The earliest to occur of any of the following events with respect to any member of the Company (a "Disqualifying Event") shall constitute an event disqualifying such member (the "Disqualified Member") from owning a membership interest in the Company:

- (a) his legal disqualification to practice medicine in the State of Florida; or

H16000021731

#907539

H16000021731

- (b) his acceptance of employment that, pursuant to existing law, places restrictions or limitations upon his continued rendering of professional medical services; or
- (c) any sale, transfer, hypothecation or pledge, or attempted sale, transfer, hypothecation or pledge, by him of a membership interest in the Company to any person ineligible to be a member of the Company; or
- (d) the occurrence of any involuntary transfer of his membership interest in the Company, the effect of which is to vest any legal or equitable interest in such membership interest in some person other than the member.

Upon the occurrence of a Disqualifying Event, the entire membership interest in the Company of the Disqualified Member shall be forfeited to, and redeemed by the Company, on the terms and conditions as may be set forth in any applicable provision of the regulations, an agreement among the members, or an agreement between the members and the Company, in effect from time to time; provided, however, in the absence of a regulation or contractual provision governing the redemption of a Disqualified Member's membership interest in the Company, the Disqualified Member shall be entitled to receive, in consideration for the forfeiture of his entire membership interest in the Company, a sum equal to the balance of the Disqualified Member's capital account on the date of the Disqualifying Event, and no more. Upon the occurrence of a Disqualifying Event, the Disqualified Member shall sever all employment with, and forthwith cease to be a member of, the Company and, except to receive payment for his membership interest in accordance with the foregoing, and payment of any other sums then lawfully due and owing to the Disqualified Member by the Company, the Disqualified Member shall then and thereafter have no further financial interest of any kind in the Company. Each member of the Company hereby grants an irrevocable power of attorney to the Company to cancel his entire membership interest in the Company upon the occurrence of a Disqualifying Event.

ARTICLE 8 Management of the Company

The Company is to be managed by one or more managers and is, therefore, a manager-managed company.

ARTICLE 9 Indemnification

The Company shall indemnify its members and managers to the fullest extent permitted by law.

H16000021731

FILED
2016 JAN 27 A 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
#907539

Jan. 26. 2016 5:43PM

No. 0107 P. 5/6

H16000021731

IN WITNESS WHEREOF, the authorized representative of the member has executed these Articles of Organization this 26th day of January, 2016.



DAVID L. ROCHE, Authorized Representative

FILED

2016 JAN 27 A 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H16000021731

#907539

H16000021731

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE OF
FLORIDA PAIN RELIEF GROUP, PLLC**

Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned professional limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the professional limited liability company is: Florida Pain Relief Group, PLLC.
2. The name and address of the registered agent and office is:

David L. Koche
601 Bayshore Boulevard, Suite 700
Tampa, Florida 33606

Having been named as registered agent and to accept service of process for the above stated professional 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, Florida Statutes.

Dated: January 26, 2016.



DAVID L. KOCHÉ

FILED
2016 JAN 27 A 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H16000021731

#907539