

L15000028259

Division of Corporations

Page 1 of 2

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.

(((H15000038630 3)))



H150000386303ABC-

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 : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
WAXMAN CLINIC LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

RECEIVED

15 FEB 16 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICESFILED
15 FEB 16 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu

I Stash FEB 17 2015

ARTICLES OF ORGANIZATION
OF
WAXMAN CLINIC LLC

THE UNDERSIGNED, pursuant to the provisions of Chapter 605 of the Florida Statutes, for the purpose of forming a Florida Limited Liability Company (the "Company"), under the laws of the State of Florida does set forth the following:

1. NAME

The name of the Company is: WAXMAN CLINIC LLC

2. PERIOD OF DURATION

In accordance with Florida Revised Limited Liability Company Act ("Act"), the term of existence shall begin the date these Articles are filed and its duration shall be perpetual, unless other dissolved or terminated by the unanimous written agreement of all members or pursuant to an event described in paragraph 7 of these Articles of Organization

3. PURPOSE

The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a Limited Liability Company organized and existing by virtue of such laws.

4. MAILING AND STREET ADDRESS OF COMPANY

The mailing and street address of the place of business in Florida for the Company is 6315 Sweet Maple Lane, Boca Raton, Florida 33433.

FILED
15 FEB 16 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5. REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent in Florida for the Company is Alan B. Cohn, 200 E. Broward Boulevard, Suite 1800, Ft. Lauderdale, Florida 33301.

6. ADMISSION OF ADDITIONAL MEMBERS

Pursuant to the Act, the Company may admit additional members upon the affirmative vote of a majority in interest of the members holding membership interests of the Company, either in attendance at a duly called meeting of the members at which a quorum exists or by written consent of the members of the Company. Any new member which is approved by the members of the Company as set forth herein shall become a member of the Company upon payment of the contribution to the capital of the Company as established from time to time by the members, and upon such member's agreement to comply with these Articles of Organization, its regulations or guidelines as the members may from time to time determine, in their sole discretion.

7. CONTINUITY OF BUSINESS

Upon death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company, the business of the Company may be continued with the consent of a majority interest of the remaining members of the Company.

8. MANAGEMENT

The Company is to be managed by Managers. The initial manager shall be as listed below; provided, that the Company may determine, from time to time, 38990-0001 21374728.1

FILED

15 FEB 16 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 FEB 16 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

to become member managed or change the manager from time to time and the Company reserves the right to update such information through its annual report filings, amendments to the Company's operating agreement, or as otherwise provided by applicable law:

Jonathan Waxman 6315 Sweet Maple Lane, Boca Raton, FL 33433

9. RIGHT OF ASSIGNEE TO BECOME A MEMBER

An assignee of a member's interest in the Company may become a member of the Company and acquire the rights and powers and be subject to the restrictions and liabilities of a member of the Company, upon the affirmative vote of a majority in interest of the members holding membership interests of the Company (excluding the member seeking to transfer his or her interest in the Company) either in attendance at a duly called meeting of the members at which a quorum exists or by written consent of the members of the Company. The rights of the assignee shall be subject to the regulations, if any, and/or such other documents or agreements governing the operation of the Company as may be entered into from time to time, provided such assignment and admission of such assignee as a member complies with the terms and conditions of the regulations of the Company, if any and/or such other documents or agreements governing the operation of the Company as may be entered into from time to time.

10. RETURN OF CAPITAL

No member shall have the right to demand the return of his or its contribution to capital except as provided in the Company's regulations or operating agreement, if any, then in existence.

15 FEB 16 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

11. AMENDMENT TO ARTICLES OF ORGANIZATION

Members may adopt, alter, amend or repeal any provision of the Articles of the Organization upon the affirmative vote of a majority in interest of the members of the Company which vote is taken at a duly called meeting of the members at which a quorum is present, or by written consent of the members of the Company.

12. REGULATIONS

Pursuant to the Act, the members of the Company may adopt, alter, amend or repeal regulations or any provision thereof, upon the affirmative vote of a majority in interest of the members of the Company in attendance at a meeting of the members duly called at which a quorum exists, or by written consent of the members of the Company.

13. AUTHORIZED REPRESENTATIVE

The name and address of the Authorized Representative signing these Articles is Alan B. Cohn, 200 E. Broward Boulevard, Suite 1800, Fort Lauderdale, Florida 33301.

IN WITNESS WHEREOF, the undersigned as Authorized Representative has executed these Articles of Organization this 12 day of February 2015.


Alan B. Cohn

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

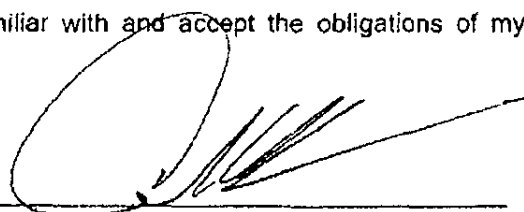
1. The name of the limited liability company is:

Waxman Clinic LLC

2. The name and address of the registered agent and office is:

Alan B. Cohn
200 E. Broward Blvd., Suite 1800
Fort Lauderdale, FL 33301

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.


Alan B. Cohn

Dated: February 13, 2015

FILED
15 FEB 16 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA