

U5000149484

**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.

(((H15000208546 3)))



H150002085463ABC+

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)617-6381

From: Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813)229-7600
Fax Number : (813)229-1660

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

Email Address: sgn-eco@slk-law.com

**FLORIDA LIMITED LIABILITY CO.
5312 17th Avenue S, Gulfport, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED
15 AUG 28 AM 10:15

RECEIVED
15 AUG 28 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H150002085463

ARTICLES OF ORGANIZATION
OF
5312 17th AVENUE S, GULFPORT, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is 5312 17th Avenue S, Gulfport, LLC.

ARTICLE II - Address:

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

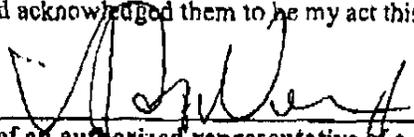
8002 Gunn Highway
Tampa, Florida 33626

ARTICLE III - Management:

The Limited Liability Company is to be managed by a manager or managers. The initial manager shall be:

Robert A. Norman, D.O.
8002 Gunn Highway
Tampa, Florida 33626

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 28th day of August 2015.



Signature of an authorized representative of a member.

(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.)

Robert A. Norman, D.O.

Typed or printed name of signee

FILED
15 AUG 28 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H150002085463

H150002085463

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is Tower Professional Services, LLC.
- 2. The name and the Florida street address of the registered agent are:

Erin Smith Aebel, Esq.
 Shumaker, Loop & Kendrick, LLP
 101 East Kennedy Boulevard, Suite 2800
 Tampa, Florida 33602

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.

Erin Smith Aebel
 Erin Smith Aebel, Esq.,
 Registered Agent

FILED
 15 AUG 28 AM 10:15
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

H150002085463