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FLORIDA LIMITED LIABILITY CO. PALM BEACH COUNTY VASCULAR CENTER, PL

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January 26, 2016 *

WARD, DAMON & POSNER, P.A.

SUBJECT: PALM BEACH COUNTY VASCULAR CENTER, PL

REF: W16000005338

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of a professional limited liability company must contain CHARTERED, PROFESSIONAL LIMITED LIABILITY COMPANY, P.L.L.C. or PLLC.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section FAX Aud. #: H16000020315 Letter Number: 216A00001663 11/PO D144/ON

SECRETARY OF STATE TALLAHASSEE. FLORIDA

16 JAN 26 0000203153 Fax Audit No.: H160000203153

ARTICLES OF ORGANIZATION OF

PALM BEACH COUNTY VASCULAR CENTER, PLLC

THE UNDERSIGNED MANAGER, pursuant to the Florida Professional Service Corporation and Limited Liability Company Act, adopts the following Articles of Organization for such Professional Limited Liability Company:

ARTICLE I

NAME

The name of this Professional Limited Liability Company is:

PALM BEACH COUNTY VASCULAR CENTER, PLLC

ARTICLE II

DURATION

The duration of this Professional Limited Liability Company is perpetual.

ARTICLE III

PURPOSE

The purposes for which this Company is organized are:

- (a) To engage in every phase and aspect of the business of rendering the same medical professional services to the public that a duly licensed person under the laws of the State of Florida is authorized to render, provided that such professional services shall be rendered only through officers, employees, and agents who are duly licensed under the laws of the State of Florida to practice medicine and perform medical related services.
- (b) To invest the funds of the Company in real estate, mortgages, stocks, bonds, or any other type of investment, and to own real and personal property necessary for the rendering of

Prepared by: Michael J Posner, Esq. 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

Bar No: 525685 • Phone: 561/842-3000

Fax Audit No.: H160000203153

JAN-26-2016 TUE 01:30 PM WARD DAMON

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TALLAHASSEE, FLORIDA

16 JAN 26 PH 3: 51 Fax Audit No.: H160000203153

Fax Audit No.: H160000203153

professional medical services.

(c) To do everything necessary and proper for the accomplishment of any of the purposes or the attaining of any of the objects or the furtherance of any of the purposes enumerated in these Articles of Organization or any amendment thereof, necessary or incidental to the protection and benefit of the Company, and in general, either alone or in association with other corporations, firms, or individuals, to carry on any lawful pursuit necessary or incidental to the accomplishment of the purposes or the attainment of the objects or the furtherance of such purposes or objects of the Corporation.

The foregoing paragraphs shall be construed as enumerating both objects and purposes of the Company; and it is hereby expressly provided that the foregoing enumeration of specific purposes shall not be held to limit or restrict in any manner the purposes of the Company otherwise permitted by law.

ARTICLE IV

MAILING ADDRESS OF THE PROFESSIONAL LIMITED LIABILITY COMPANY

The mailing address of the business of this Professional Limited Liability Company is 2010 Continental Drive, West Palm Beach, Florida 33407, and the principal place of business of this Professional Limited Liability Company is 2010 Continental Drive, West Palm Beach, Florida 33407.

ARTICLE V

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of this Professional Limited Liability Company's initial registered office in Florida is 4420 Beacon Circle, Suite 100, West Palm Beach, Florida 33407 and the name of its initial registered agent at that address is Ward Damon Business Services, LLC.

Prepared by: Michael J Posner, Esq. 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

Bar No: 525685 • Phone: 561/842-3000

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ARTICLE VI

MANAGEMENT

The Professional Limited Liability Company is to be managed by one or more managers and is therefore a manager - managed professional limited liability company. The name and address of the initial manager is as follows:

Gennaro Sagliocca, M.D. 2010 Continental Drive, West Palm Beach, Florida 33407

DATED this do day of January, 2016

By: V-U

Germano Sagliocca, M.D., Manager
(In accordance with Florida Statutes \$605.0205(3) the execution of this document constitutes an affirmation under penalties of perpury that the facts stated herein are accurate.)

STATE OF FLORIDA) ss: COUNTY OF PALM BEACH)

I HEREBY CERTIFY that on this day, sworn to and subscribed before me, an officer duly authorized in the State and County aforesald to take acknowledgments, personally appeared Gennaro Sagliocca, M.D., to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 22 day of January, 2016.

Notary Public

My Commission Expires:

Prepared by: Michael J Posner, Esq. 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407 Bar No: 525685 • Phone: 561/842-3000

MCHAEL JPOSNER
MY COMMISSION # FF 152581
EXPRES: October 14, 2018
Boxed Thru Hestry Politic Underwriters

Fax Audit No.: 416 000 203 153

P. 006

HARD DANON

SECRETARY OF STATE
TALL ANASSEE, FLORIDA
Fax MidiNos: H160000203153

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

ACKNOWLEDGMENT:

Having been named as registered agent and to accept service of process for PALM BEACH COUNTY VASCULAR CENTER, PLLC, at the initial registered office of the Professional Limited Liability Company in this State designated in its Articles of Organization, 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.

Date: January 21, 2016

Ward Damon Business Services, LLC

Michael I Posner, Member

(Company Seal)

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Prepared by: Michael J Posner, Esq. 4420 Beacon Circle, Suite 100 West Palm Beach, Florida 33407

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