

L16000174010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

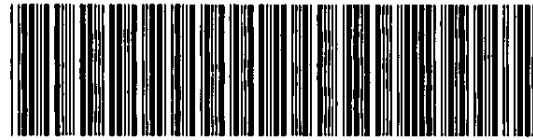
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600289963576

09/12/16--01039--007 \*\*180.00

72H  
9/17/16  
16 SEP 12 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**JOHN T. PRAHL**

Attorney at Law

Telephone: (305)234-3680  
Facsimile: (305)234-3605  
E-Mail: John@JohnTPrahl.com

12376 S.W. 82 Ave.  
Pinecrest, FL 33156

September 7, 2016

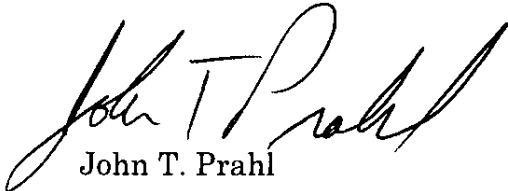
Department of State  
Division of Corporations  
Corporate Filing  
PO Box 6327  
Tallahassee, FL 32314

**Re: LOUIS AND MELANIE GLAZER HEALTH PLAN, LLC**

Ladies and Gentlemen:

Enclosed please find Articles of Organization for LOUIS AND MELANIE GLAZER HEALTH PLAN, LLC, and a check in the amount of \$160.00 to cover filing fees and a Certificate of Good Standing. Please file and return a certified copy of same along with the Certificate of Good Standing.

Sincerely yours,



John T. Prahl

JTP/hp

Enclosure

**ARTICLES OF ORGANIZATION  
FOR  
LOUIS AND MELANIE GLAZER HEALTH PLAN, LLC**

**ARTICLE I  
NAME**

The name of this limited liability company shall be LOUIS AND MELANIE GLAZER HEALTH PLAN, LLC.

**ARTICLE II  
DURATION**

The limited liability company shall have perpetual existence.

**ARTICLE III  
PURPOSE AND POWERS**

Except as restricted by these Articles of Organization, this limited liability company is organized for each and every legal and lawful purpose for which a limited liability company may be organized pursuant to the Florida Revised Limited Liability Company Act.

Except as restricted by these Articles of Organization, this limited liability company shall have and may exercise all powers and rights, which a limited liability company may exercise under Florida law, or the laws of the United States of America.

**ARTICLE IV  
PRINCIPAL OFFICE**

The mailing address and the street address of this limited liability company shall be:

2100 S. Ocean Lane  
Unit 2408  
Ft. Lauderdale, Florida 33316

**ARTICLE V  
INITIAL REGISTERED AGENT AND OFFICE**

The initial registered agent for this limited liability company and the street address of the initial registered agent are:

John T. Prah  
12376 SW 82<sup>nd</sup> Avenue  
Pinecrest, FL 33156

**ARTICLE VI  
ADDITIONAL MEMBERS**

This limited liability company may admit additional members subject to approval by

16 SEP 12 AM 10:39  
STORE FRANKLIN COUNTY  
ALLENHURST, FL 32007  
FILED

unanimous vote of the existing members.

**ARTICLE VII**  
**MANAGER**

This limited liability company shall be managed by one or more Managers. The name and address of the initial Managers are as follows:

Louis Glazer, M.D.  
Melanie Glazer  
2100 S. Ocean Lane  
Unit 2408  
Ft. Lauderdale, Florida 33316

The initial Managers shall serve until the first annual meeting of members, or until his successor is elected and qualified, or until death or resignation.

**ARTICLE VIII**  
**OPERATING AGREEMENT**

The Operating Agreement of this limited liability company may only be adopted, amended, altered or repealed by the unanimous vote of the members.


**ARTICLE IX**  
**MEMBERS' RIGHT TO CONTINUE BUSINESS**

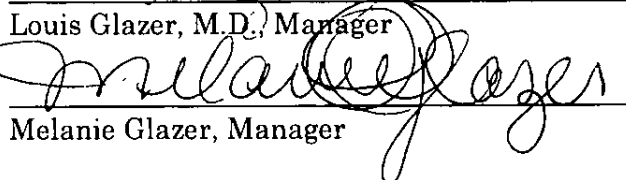
The members remaining after the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or any other event which terminates the membership of a member, have the right to continue the business of this limited liability company subject to approval by unanimous vote of the remaining members; provided that at least one member remains.

**ARTICLE X**  
**AMENDMENT**

This limited liability company reserves the right to amend, alter or repeal any provision contained in these Articles of Organization in accordance with the Florida Revised Limited Liability Company Act and the Operating Agreement.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 7 day of September, 2016.

  
\_\_\_\_\_  
Louis Glazer, M.D., Manager

  
\_\_\_\_\_  
Melanie Glazer, Manager

**CERTIFICATE OF DESIGNATION  
OF  
REGISTERED AGENT/REGISTERED OFFICE**

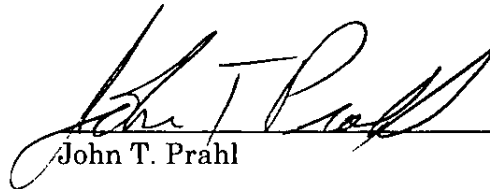
The name of the limited liability company is LOUIS AND MELANIE GLAZER HEALTH PLAN, LLC.

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

John T. Prah  
12376 SW 82<sup>nd</sup> Avenue  
Pinecrest, FL 33156

Having been named as registered agent and to accept service of process for the above-named 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.

Dated: 9/7/2016

  
\_\_\_\_\_  
John T. Prah

16 SEP 12 AM 10:39  
STATE OF FLORIDA  
SALVADOR PEREZ