

L17000038484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

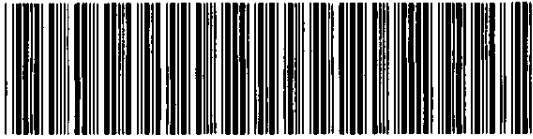
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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C. GOLDEN
FEB 21 2017

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

INTERVENTIONAL SPECIALIST

CENTER, LLC

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

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Signature _____

Requested by: SETH

02/17/17

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

FILED
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CLERK OF DISTRICT COURT
NAPLES, FLORIDA

ARTICLES OF ORGANIZATION
OF
INTERVENTIONAL SPECIALIST CENTER, LLC

Pursuant to Section 605.0201 of the Florida Revised Limited Liability Company Act, Florida Statutes, as amended from time to time (the "Act"), the following are adopted as the Articles of Organization of the limited liability company organized hereby:

ARTICLE I
NAME

The name of the limited liability company is Interventional Specialist Center, LLC (the "Company").

ARTICLE II
EFFECTIVE DATE AND DURATION

The effective date upon which this Company shall come into existence shall be the date these Articles of Organization are filed. Unless earlier terminated pursuant to the Act or the Operating Agreement (as defined in § 605.0105 of the Act) of the Company, the period of its duration shall be perpetual.

ARTICLE III
ADDRESS

The mailing and street address of the principal office of the Company shall be 2350 Vanderbilt Beach Road, Suite 302B, Naples, Florida 34109.

ARTICLE IV
REGISTERED AGENT AND OFFICE

The initial registered office of the Company shall be 2350 Vanderbilt Beach Road, Suite 302B, Naples, Florida 34109, and its initial registered agent at such office shall be Heather Smith-Fernandez.

ARTICLE V
MANAGEMENT OF THE COMPANY

The Company will be managed by one or more managers in accordance with and subject to the requirements of the Act and Operating Agreement of the Company. The name and street address of the sole manager of this Company is:

MSF

Name

Address

Heather Smith-Fernandez

2350 Vanderbilt Beach Road, Suite 302B
Naples, Florida 34109

**ARTICLE VI
OFFICERS OF THE COMPANY**

The Officers of the Company are as follows:

Office

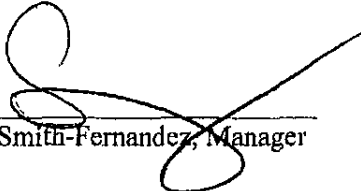
Name

President & Secretary

Heather Smith-Fernandez

IN WITNESS WHEREOF, the undersigned Manager of the Company has executed these Articles of Organization on behalf of the Company in accordance with § 605.0201 of the Act.

Dated this 20th day of February, 2017.

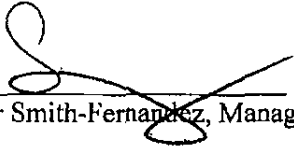
By: 
Heather Smith-Fernandez, Manager

**CERTIFICATE DESIGNATING REGISTERED OFFICE
AND
REGISTERED AGENT FOR THE SERVICE OF PROCESS
WITHIN FLORIDA**

In compliance with Chapter 605, Florida Statutes, as amended from time to time (the "Act"), the following is submitted:

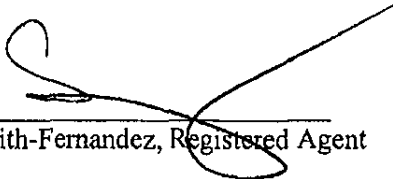
Interventional Specialist Center, LLC, desiring to organize or qualify under the laws of the State of Florida as a limited liability company pursuant to the Act, hereby designates Heather Smith-Fernandez as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 2350 Vanderbilt Beach Road, Suite 302B, Naples, Florida 34109.

Dated this 20th day of February, 2017.

By: 
Heather Smith-Fernandez, Manager

Having been named as registered agent to accept service of process for the above stated limited liability company, at the place designated in this certificate, I hereby agree to 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 this 20th day of February, 2017.


Heather Smith-Fernandez, Registered Agent

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