

5/3/2018

**L18000139295**

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : I20180000011  
Phone : (844)386-0178  
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FLORIDA LIMITED LIABILITY CO.  
PHYSICIAN PRACTICE PARTNERS, LLC

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ARTICLES OF ORGANIZATION  
OF  
**PHYSICIAN PRACTICE PARTNERS, LLC**

ARTICLE I – Name

The name of the Limited Liability Company is

**PHYSICIAN PRACTICE PARTNERS, LLC**

ARTICLE II – Address

The mailing address and street address of the principal office of the Company is

14101 SW 88<sup>TH</sup> AVE  
MIAMI FL 33176

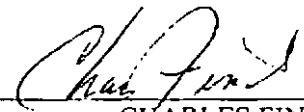
ARTICLE III –Registered agent and Office

The street address of the Company's initial registered office is

14101 SW 88<sup>TH</sup> AVE  
MIAMI FL 33176

The name of its initial registered agent at such office is

CHARLES FINDO

  
CHARLES FINDO  
Authorized Signor

May 02, 2018

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TALLAHASSEE, FLORIDA

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ARTICLE IV -Initial Members and Directors

The name and address of the Initial member and Director of this Limited Liability Company is:

CHARLES FINDO, DIRECTOR, MANAGING MEMBER  
14101 SW 88<sup>TH</sup> AVE  
MIAMI FL 33176

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENTS

Having been named as registered agent and to accept service of process for the above stated limited liability Company at the place designated in these Articles of Organization, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of duties, and is familiar with and accepts the obligations of the position as registered agent as provided for in chapter 605, Florida Statutes.

  
\_\_\_\_\_  
CHARLES FINDO

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