8/1/2018



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### FLORIDA LIMITED LIABILITY CO.

Jana Ramsey-Liao, MD, PLLC

Certificate of Status	0
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# FOR JANA RAMSEY-LIAO, MD, PLLC

#### ARTICLE I - Name:

The name of the Professional Limited Liability Company is JANA RAMSEY-LIAO, MD, PLLC.

#### ARTICLE II - Purpose:

The purpose of the Professional Limited Liability Company ("Company") is to engage in the practice of medicine.

#### ARTICLE II - Address:

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

1444 Dexter Drive Clearwater, FL 33756

#### ARTICLE III - Managers:

The Company will be manager-managed.

#### ARTICLE IV - Indemnification:

The Company shall, to the full extent permitted by Section 605.0408, of the Florida Statutes, as amended from time to time, indemnify all persons whom it may indemnify pursuant thereto. The indemnification provided by this Article IV shall not limit or exclude any rights, indemnities or limitations of liabilities to which any person may be entitled, as a matter of law, under the regulations of the Company, by agreement or otherwise.

#### ARTICLE V – ADMISSION OF MEMBERS

No person may be admitted as a Member, whether as a substituted Member or an additional Member, except upon the consent of all the Members as provided in Section 605.0401(3)(c) or Section 605.0701(3) of the Florida Statutes and in the manner set forth in the Operating Agreement of the Company, as it may be amended from time to time, or as otherwise agreed by all of the Members. Further, as provided in Section 621.09(2) of the Florida Statutes, no person may admitted as a Member of the Company unless such person is duly licensed or otherwise legally authorized to render medical services in the State of Florida.

No transfer of an Interest in the Company is permitted or valid except in accordance with

ARTICLE VI – TRANSFER OF INTEREST IN COMPANY

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the restrictions on transfer contained in the Operating Agreement of the Company, as amended at the effective time of the transfer.

#### ARTICLE VII - Registered Agent and Registered Address

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

Philip C. Campbell, Esq. Shumaker, Loop & Kendrick, LLP 101 East Kennedy Boulevard **Suite 2800** Tampa, Florida 33602

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 1st day of August, 2018.

Signature of an authorized representative of a member.

(In accordance with Section 605.0202(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in section 817.155, Florida Statutes)

C. Philip Campbell

Typed or printed name of signee

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF CHAPTER 605, FLORIDA STATUTES, THE PROFESSIONAL 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 professional limited liability company is JANA RAMSEY-LIAO, MD, PLLC.
- 2. The name and the Florida street address of the registered agent are:

C. Philip Campbell, 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 professional 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.

C. Philip Campbell, Esq.

Registered Agent