

1/24/2019

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## To:

Division of Corporations  
Fax Number : (850)617-6381

## From:

Account Name : SMITH HULSEY & BUSEY  
Account Number : 075030000653  
Phone : (904)359-7700  
Fax Number : (904)359-7708

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: LouLaVopa@mac.com

**FLORIDA LIMITED LIABILITY CO.**

**L. LaVopa, MD - Emergency Medicine Consultant, PLLC**

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**ARTICLES OF ORGANIZATION  
OF  
L. LAVOPA, MD - EMERGENCY MEDICINE CONSULTANT, PLLC**

The undersigned organizer, who is the authorized representative of L. LaVopa, MD - Emergency Medicine Consultant, PLLC (the "Company") under the Florida Professional Service Corporation and Limited Liability Company Act, hereby adopts the following Articles of Organization:

**ARTICLE I - NAME**

The name of the Company is L. LaVopa, MD - Emergency Medicine Consultant, PLLC.

**ARTICLE II - PRINCIPAL OFFICE**

The street and mailing address of the principal office of the Company is 1192 Lake Parke Drive, Saint Johns, Florida 32259-3023.

**ARTICLE III - NATURE OF BUSINESS**

The purpose for which the Company is organized is to provide professional medical and healthcare services.

**ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS**

The name and street address of the initial registered agent are Smith Hulsey & Busey, Professional Association and One Independent Drive, Suite 3300, Jacksonville, Florida 32202.

**ARTICLE V - MANAGEMENT**

The Company shall be a manager-managed company. The initial manager shall be Louis V. LaVopa, MD.

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization this 23<sup>rd</sup> day of January, 2019.

  
\_\_\_\_\_  
Thomas Heekin  
Authorized Representative

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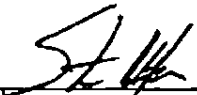
**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 605.0113, Florida Statutes, L. LaVopa, MD - Emergency Medicine Consultant, PLLC, a Florida 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 limited liability company is L. LaVopa, MD - Emergency Medicine Consultant, PLLC.
2. The name and street address of the registered agent are Smith Hulsey & Busey, Professional Association and One Independent Drive, Suite 3300, Jacksonville, Florida 32202.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, Smith Hulsey & Busey, Professional Association hereby accepts the appointment as registered agent and agrees to act in this capacity. Smith Hulsey & Busey, Professional Association further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated this 23<sup>rd</sup> day of January, 2019.

By:   
Stephen D. Moore, Jr.  
Vice President

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