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Doing so will generate another cover sheet.

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•	Division of Cor	porations		
	Fax Number	: (850)617-6381		
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From:				_
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	-	SEP
	Account Number	: I2 000000001 9	 }	7
	Phone	: (305)552-5973	2	
	Fax Number	: (305)675-5944	• 4 .	ဘ
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FLORIDA LIMITED LIABILITY CO. VANGUARD MEDICAL HOLDINGS LLC.

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Electronic Filing Menu

Corporate Filing Menu

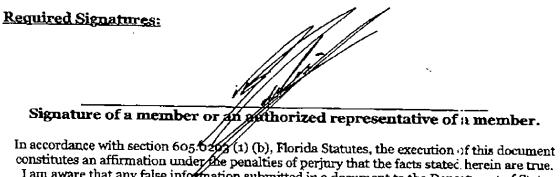
Help

المرسم

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is: (Must end with the words "Limited . iability Company, "L.L.C." or "LLC.")
- Vanguard Medical Holdings LLC.
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liebnic
Company is: 16658 Sweet bay drive
Delray Beach, FL 33445
ARTICLE III - Registered Agent, Registered Office:
The name and the Florida street address of the registered agent
Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
Acmando Rubio Barban
16658 Sweet Bay Drive
The Books Ti
ARTICLE IV-
The name and title of each person authorized to manage and control the Limited Liability Company:
Armando Rubio Barban (AMBR)
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I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F. S.

Typed or printed name of signee

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, 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 as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)