

Division of Corporations

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Florida Department of State

Division of Corporations
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To:

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

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LYOCHE, P.A.
Account Number : 073222003555
Phone : (561) 686-3307
Fax Number : (561) 290-1590

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

Email Address: bmann@nasonyeager.com

FLORIDA LIMITED LIABILITY CO.

Neil G. Goldhaber, M.D., LLC

Certificate of Status	1
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December 26, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MASON, YEAGER

SUBJECT: NEIL G. GOLDBER, M.D., LLC
REF: W19000110837

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H19000368522
Letter Number: 819A00026142

ARTICLES OF ORGANIZATION
OF
NEIL G. GOLDBABER, M.D., LLC

I, the undersigned authorized representative of the Member, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I
NAME

The name of this Limited Liability Company is:

Neil G. Goldhaber, M.D., LLC

ARTICLE II
ADDRESS

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

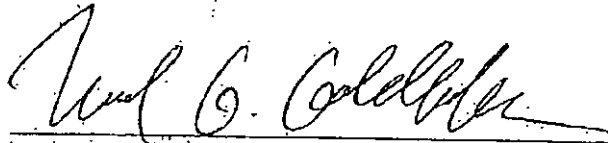
10075 Jog Road, Suite 309
Boynton Beach, FL 33437

ARTICLE III
CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

The name and the Florida street address of the registered agent and office are:

Neil G. Goldhaber, M.D.
10075 Jog Road, Suite 309
Boynton Beach, FL 33437

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.



Neil G. Goldhaber, M.D., Registered Agent

ARTICLE IV
MANAGEMENT

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of, its Manager and is, therefore, a manager-managed company.

Title: Manager
Neil G. Goldhaber, M.D.
10075 Jog Road, Suite 309
Boynton Beach, FL 33437

IN WITNESS WHEREOF, the undersigned authorized representative of the Member has made and subscribed these Articles of Organization at Boynton Beach, Florida, for the uses and purposes aforesaid, this 23 day of December, 2019.



Neil G. Goldhaber, M.D., Authorized Representative
of the Member

December 20, 2019

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

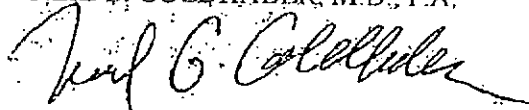
RE: Neil G. Goldhaber, M.D., P.A., a Florida professional association (the "Association")
Document No.: P99000029718

Dear Sir/Madam:

I am the President of the above referenced Association, Neil G. Goldhaber, M.D., P.A. The Association hereby authorizes the formation of Neil G. Goldhaber, M.D., LLC, a Florida limited liability company, and allows the limited liability company to share its name, "Neil G. Goldhaber, M.D."

Please contact my office at 561-734-3636 should you have any questions regarding the above.

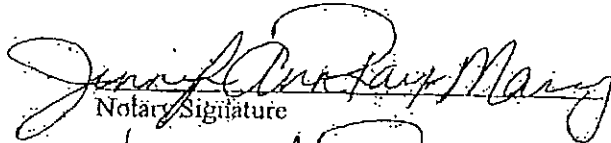
NEIL G. GOLDHABER, M.D., P.A.



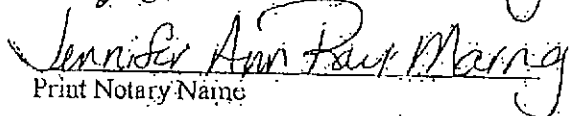
Neil G. Goldhaber, M.D., as President

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 23 day of December, 2019, by Neil G. Goldhaber, M.D., as President of Neil G. Goldhaber, M.D., P.A., () who is personally known to me OR (☒) who produced Driver's License as identification.



Notary Signature



Print Notary Name

State of Florida at Large

My Commission Expires: June 13, 2020

