

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000088471 3)))



H200000884713ABC/

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : 120000000195  
Phone : (850) 521-0821  
Fax Number : (850) 558-1515

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

**Email Address:** \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**

**Emergent Physicians of Doral, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

ARTICLES OF ORGANIZATION  
OF  
EMERGENT PHYSICIANS OF DORAL, LLC

The undersigned certify that we have associated ourselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

ARTICLE I

NAME AND PRINCIPAL PLACE OF BUSINESS

The name of the limited liability company shall be EMERGENT PHYSICIANS OF DORAL, LLC, and its principal office shall be located at 6200 Sunset Drive, in the City of Miami, County of Miami-Dade, State of Florida, but it shall have the power and authority to establish branch offices at any other place or places as the members may designate.

ARTICLE II

PURPOSES AND POWERS

In addition to the powers authorized by the laws of the State of Florida for limited liability companies, the general nature of the business or businesses to be transacted, and which the limited liability company is authorized to transact, shall be as follows:

(1) To engage in the business of retaining licensed healthcare providers for the purpose of providing professional medical and ancillary services to members of the public who seek such services from various outpatient facilities generically referred to as urgent care centers.

(2) In general, to carry on any and all incidental business; to have and exercise all the powers conferred by the laws of the State of Florida, and to do any and all things set forth in these Articles to the same extent as a natural person might or could do.

(3) To purchase or otherwise acquire, undertake, carry on, improve, or develop, all or any of the business, good will, rights, assets, and liabilities of any person, firm, association, or corporation carrying on any kind of business of a similar nature to that which this limited liability company is authorized to carry

on, pursuant to the provisions of these Articles; and to hold, utilize, and in any manner dispose of the rights and property so acquired.

(4) To enter into and make all necessary contracts for its business with any person, entity, partnership, association, corporation, domestic or foreign, or of any domestic or foreign state, government, or governmental authority, or of any political or administrative subdivision, or department, and to perform and carry out, assign, cancel, or rescind any of such contracts.

(5) To do everything necessary, proper, advisable, or convenient for the accomplishment of any of the purposes, or the attainment of any of the objects, or the furtherance of any of the powers set forth in these Articles, either alone or in association with others incidental or pertaining to, or going out of, or connected with its business or powers, provided the same shall not be inconsistent with the laws of the State of Florida.

The several clauses contained in this statement of the general nature of the business or businesses to be transacted shall be construed as both purposes and powers of this limited liability company, and statements contained in each clause shall, except as otherwise expressed, be in no way limited or restricted by reference to or inference from the terms of any other clause. They shall be regarded as independent purposes and powers.

Nothing contained in these Articles shall be deemed or construed as authorizing or permitting, or purporting to authorize or permit the limited liability company to carry on any business, exercise any power, or do any act which a limited liability company may not, under Florida laws, lawfully carry on, exercise, or do.

### ARTICLE III

#### EXERCISE OF POWERS

All limited liability company powers shall be exercised by or under the authority of the Operating Agreement. This Article may be amended from time to time in the regulations of the limited liability company by a unanimous vote of the members of the limited liability company.

## ARTICLE IV

## ADMISSION OF ADDITIONAL MEMBERS

Members shall have the right to admit new members by unanimous written consent. Contributions required of new members shall be determined as of the time of admission to the limited liability company.

A member's interest in the limited liability company may not be sold or otherwise transferred except with the unanimous written consent of the Members.

## ARTICLE V

## DURATION

This limited liability company shall exist until dissolved in a manner provided by law.


To avoid dissolution under this section, the limited liability company must have at least two (2) remaining members. If a disassociation leaves the limited liability company with only one (1) remaining member, that member may admit an additional member in order to continue the limited liability company within a reasonable time as proscribed by the laws of the state of Florida.

## ARTICLE VI

## RELATIONSHIP OF ARTICLES OF ORGANIZATION TO OPERATING AGREEMENT

If a provision of these Articles of Organization differs from a provision of the limited liability company's Operating Agreement then, to the extent allowed by law, the Operating Agreement will govern.

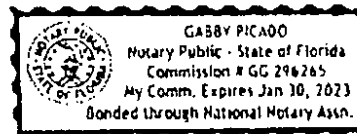
Executed by the undersigned at Miami-Dade County, Florida on  
March 19, 2020.

  
\_\_\_\_\_  
DAVID R. NATEMAN, Organizer

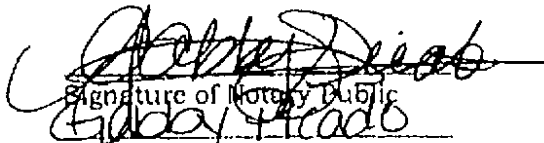
H20000086471 3

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

SS:



The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization, this March 19, 2020, by DAVID R. NATEMAN, who is personally known to me or who has produced Driver's License (type of identification) as identification.

  
Signature of Notary Public  
Name typed, printed, or stamped  
Gabby Picado  
Title or rank  
Credentialing Coordinator

Serial number, if any

H20000086471 3

H20000088471 3

## INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The name of the limited liability company is EMERGENT PHYSICIANS OF DORAL, LLC

The address of the initial registered office of the limited liability company is 6200 Sunset Drive, in the City of Miami, County of Miami-Dade, State of Florida 33143, and the name of the company's initial registered agent at that address is DAVID R. NATEMAN.

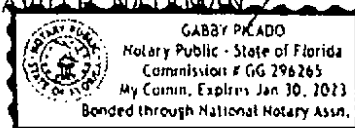
The undersigned, being an original member of the limited liability company, certifies that this instrument constitutes the proposed Articles of Organization of EMERGENT PHYSICIANS OF DORAL, LLC

Having been named as registered agent 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 am familiar with and accept the obligations of my position as Registered Agent.

Executed by the undersigned at Miami-Dade County, Florida on March 19, 2020.

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE ss:

David R. Nateman (SEAL)  
DAVID R. NATEMAN



The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization, this March 19, 2020, by DAVID R. NATEMAN, who is personally known to me or who has produced Driver's license (type of identification) as identification.

Gabby Picado  
Signature of Notary Public  
Gabby Picado  
Name typed, printed, or stamped  
Credentiaing Coordinator  
Title or rank

Serial number, if any

FILED  
2020 MAR 19 AM 9:40  
TALLAHASSEE FL 32301

H20000088471 3