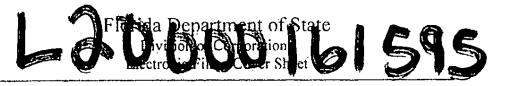
Page 1 of 3

Division of Corporations

Page 1 of 1

19415527141 From: Corporate Paralegals



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.

(((H200001832173)))



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 : WILLIAMS, PARKER, HARRISON, DIETZ 🐒

Account Number: 072720000266 Phone : (941)366-4800 Fax Number : (941)552-7141

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

Email Address: empowered fm@aol.com

FLORIDA LIMITED LIABILITY CO. **Empowered Family Medicine, PLLC** 

Certificate of Status	1
Certified Copy	i
Page Count	02
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

άi

## H2000183217 3

## ARTICLES OF ORGANIZATION OF EMPOWERED FAMILY MEDICINE, PLUC

The undersigned, an authorized representative, hereby subscribes to these Articles of Organization to form a limited liability company (the "Company") under the Florida Revised Limited Liability Company Act (Chapter 605, Florida Statutes) and the Professional Service Corporation and Eimited Liability Company Act (Chapter 621; Florida Statutes) and in accordance with F.S. § 605.0201.

1. Name. The name of the Company is:

## Empowered Family Medicine, PLLC

2. Purposes. The purposes for which this Company is organized are as follows:

To acquire, establish, own, maintain, manage, operate, conduct, carry on and engage in the practice of medicine, and to make any and all investments and/or own any and all property in the United States or elsewhere authorized or permitted by Chapters 605 and 621, Florida Statutes.

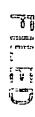
In the course or furtherance of such practice of medicine, to invest funds in real estate, mortgages, stocks, bonds or any other investments of any conceivable type whatsoever, and to own any real or personal property necessary or incidental to such practice of medicine.

In general, to do and perform any and all acts and things whatsoever which may be or become necessary, desirable, proper, convenient, connected with or related or incident to the foregoing purposes or powers but which are not forbidden by the laws of the State of Florida; provided, however, that this Company shall not do any act or thing in conflict with any laws of the State of Florida applicable to the practice of medicine.

- 3. Mailing Address and Address of Principal Office of Company. The mailing address and the principal office address of the Company is 5130 Redbriar Court, Sarasota, Florida 34238-4322.
- 4. Name and Street Address of Initial Registered Agent. The name and street address of the Company's initial registered agent is Alec M. Rubin, M.D., 5130 Redbrian Court, Sarasota, Florida 34238-4322.
- 5. Management. The Company shall be a manager-managed company. The name and address of the initial manager of the Company is as follows:

Alec M. Rubin, M.D. 5130 Redbriar Court Sarasota, FL. 34238-4322

6. Existence. In accordance with F.S. § 605.0207, the Company's existence shall Figin at The date and time these Articles of Organization are filed, as evidenced by the Department of State's date and time endorsement.



- 7. Members. Membership in the Company is restricted to professional limited liability companies, professional comporations, and individuals who themselves are duly licensed or otherwise legally authorized to engage in the practice of medicine in the State of Florida. Nomember of the Company shall enter into any type of agreement vesting another person with the authority to exercise any of that member's voting power in the Company.
- 8. Amendment. These Articles of Organization may be amended in the manner provided in the Operating Agreement of the Company.

IN WITNESS WHEREOF, the undersigned authorized representative has executed these Articles of Organization as of the 15th day of June 2020 (the "Execution Date").

Authorized Representative

## ACKNOWLEDGEMENT OF REGISTERED AGENT

In accordance with F.S. §§ 605.0201(2)(c) and 605.0113, the undersigned is familiar with the obligations imposed on the position of registered agent by the Florida Revised Limited Liability Company Act and hereby accepts appointment as the initial registered agent of the Company.

IN WITNESS WHEREOF, the undersigned has executed this Acknowledgement of Registered Agent as of the Execution Date.

M. Rulin

Registered Agent

5619783.v1