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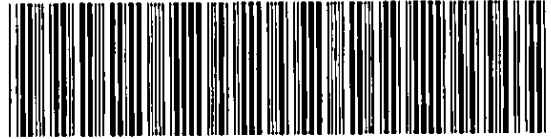
(Business Entity Name)

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Date: **November 04, 2021**

Account#: 1200000000088

Name: **KEN HOWELL**

Reference #: **1519470**

Entity Name: **DREW STEIN, MD, PLLC**

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other

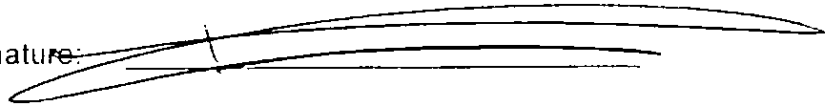
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ISSUES? CALL

KEN:

518-213-0738

Authorized Amount: **\$155.00**

Signature: 

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SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION
OF
DREW STEIN, MD, PLLC**

The undersigned, acting as organizer of this professional limited liability company pursuant to Chapter 621 of the Florida Statutes, hereby forms a professional limited liability company under the laws of the State of Florida and adopts the following Articles of Organization for such limited liability company.

ARTICLE I - Name:

The name of the professional limited liability company is **Drew Stein, MD, PLLC** (the "Company").

ARTICLE II - Address:

The mailing address and street address of the Company is 7576 Isla Verde Way, Delray Beach, FL 33446.

ARTICLE III – Existence and Duration:

The Company shall commence its existence on the date that these Articles of Organization are filed with the Department of State, and its duration shall be perpetual unless sooner dissolved by law.

ARTICLE IV - Management:

The Company shall be a manager-managed professional limited liability company. The name and address of the initial manager of the Company is:

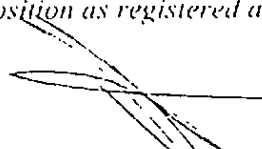
Drew Stein, MD
7576 Isla Verde Way
Delray Beach, FL 33446.

ARTICLE V – Registered Agent

The name and Florida street address of the initial registered agent of the Company is:

Drew Stein, MD
7576 Isla Verde Way
Delray Beach, FL 33446.

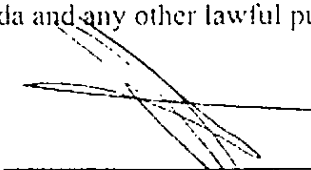
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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, Florida Statutes.



Drew Stein, MD, Registered Agent

ARTICLE VI – Purpose

The Company is organized for the sole and specific purpose of rendering professional medical services under the laws of the State of Florida and any other lawful purpose.



Drew Stein, MD, Authorized Representative

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 section 817.155, Florida Statutes.)

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SECRETARY OF STATE
TALLAHASSEE, FL