

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L22000026498

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

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

****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.
AOC Dade LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

2022 JAN 24 PM 3:40

HL

2022 JAN 24 AM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: AOC Dade LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven Rosenthal
Name of Person

Marx Rosenthal PLLC
Firm/Company

One SE Third Avenue, Suite 1210
Address

Miami, FL 33131
City/State and Zip Code

Steve@marxrosenthal.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve Rosenthal 786 378-8121
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AOC Dade LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

9900 E Broadview Drive
Bay Harbor Islands, FL 33154
USA

9900 E Broadview Drive
Bay Harbor Islands, FL 33154
USA

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

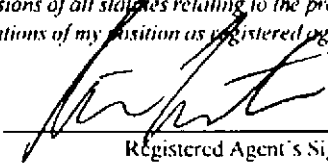
The name and the Florida street address of the registered agent are:

Marx Rosenthal PLLC
Name

One SE Third Avenue, Suite 1210
Florida street address (P.O. Box **NOT** acceptable)

Miami FL 33131
City State Zip

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)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:
"AMBR" = Authorized Member
"MGR" = Manager

Name and Address:

<u>MGR</u>	<u>Richard Rozenocwaig, MD</u> <u>9900 E Broadview Drive</u> <u>Bay Harbor Islands, FL 33154</u>
<u>MGR</u>	<u>Rolando Garcia, Jr., MD</u> <u>526 N Parkway</u> <u>Golden Beach, FL 33160</u>
<u>MGR</u>	<u>Dominic J. Lewis, MD</u> <u>721 Conch Shell Way</u> <u>Plantation, FL 33324</u>
_____	_____
_____	_____

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.
This company shall be a manager-managed limited liability company for purposes of the Florida Revised Limited Liability Company Act. Only those persons or entities listed as Managers may bind the company in any legal manner.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Richard Rozenocwaig, MD
Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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