

L22000403044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

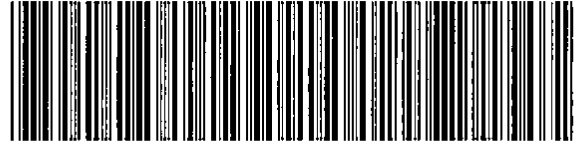
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Greater Gainesville Anesthesia Associates, LLC

Signature _____

Requested by: SETH

09/14/22

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
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____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
GREATER GAINESVILLE ANESTHESIA ASSOCIATES, LLC

ARTICLE I - NAME

The name of the limited liability company is **Greater Gainesville Anesthesia Associates, LLC**.

ARTICLE II - ADDRESS

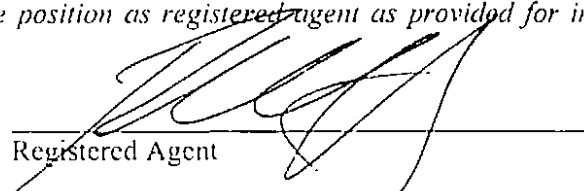
The mailing address is 1100 Bellevue Way NE, Suite 8A, No. 188, Bellevue, WA 98004 and the street address of the principal office of the limited liability company is 1100 Bellevue Way NE, Suite 8A, No. 188, Bellevue, WA 98004.

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S ACCEPTANCE

The name and address of the registered agent and office is:

Blalock Walters, P.A.
2 North Tamiami Trail
Suite 400
Sarasota, FL 34236

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relative to the proper and complete performance of such duties, and is familiar with and accepts the obligations of the position as registered agent as provided for in Chapter 605, Florida Statutes.

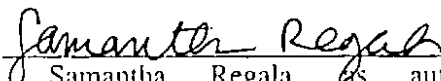


Registered Agent

ARTICLE IV - MANAGEMENT

The limited liability company is to be manager-managed. The initial managers shall be Rizwana Thanawala, M.D., Jay Kreger, and Samantha Hystad. The initial managers' addresses are 1100 Bellevue Way NE, Suite 8A, No. 188, Bellevue, WA 98004.

IN WITNESS WHEREOF, these Articles of Organization are executed on this 15th day of September, 2022.

By: 
Samantha Regala, as authorized
representative of Greater Gainesville
Anesthesia Associates, LLC

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