

12/5/23, 12:29 PM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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.

(((1123000414842 3)))



H230004148423ABC

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 : BACHMAN LEGAL, LLC.

Account Number : I20180000022

Phone : (813)200-6114

Fax Number : (813)402-0556

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

Email Address: tsharma77@yahoo.com

**FLORIDA LIMITED LIABILITY CO.
TB VASCULAR ASC LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION
OF
TB VASCULAR ASC LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, does hereby form a limited liability company under the laws of the State of Florida.

ARTICLE I

Name

The name of the limited liability company shall be TB VASCULAR ASC LLC.

ARTICLE II

Initial Principal Office Street and Mailing Address

The Company's initial principal office street address and mailing address is 14134 Nephron Lane, Hudson, FL 34667.

Article III

Period of Duration

The limited liability company shall begin existence on the day of filing, and shall continue in perpetuity, or until dissolved in a manner provided by law or by regulation adopted by the Members of the limited liability company.

Article IV

Purposes

The limited liability company may engage in the transaction of any or all lawful business for which limited liability companies may be formed under the laws of the State of Florida.

Article V

Registered Office and Registered Agent

The street address of its initial registered office of the Company is 1055 S. Fort Harrison Ave., Clearwater, FL 33756, and the name of its initial registered agent at that address is Tushar Sharma, M.D.

Article VI

Management

The management of the limited liability company, unless otherwise provided in the articles of organization or the operating agreement, shall be vested in a Board of Managers.

2023 DEC -5 AM 4:34
OFFICE OF THE
CLERK OF THE
COURT
HARRIS COUNTY
TEXAS

FILED

DocuSign Envelope ID: 4528D638-8F86-4C79-ADB3-54FC4D5302BE

Article VII
Members

The name and address of a member of the Company is:

Name:

Address:

Tushar Sharma, M.D.

1055 S. Fort Harrison Ave.
Clearwater, FL 33756

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization
the 5th day of December 2023.

DocuSigned by:

Tushar Sharma

Tushar Sharma, M.D.

Authorized Representative

FILED

2023 DEC -5 AM 4:34
CLERK OF STATE
TALLAHASSEE, FL

DocuSign Envelope ID: 4528D638-8F86-4C79-ADB3-54FC4D5302BE

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, 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 relating to the proper and complete performance of its duties and is familiar with and accepts the duties and obligations of its position as registered agent.

Dated this 5th day of December 2023.

REGISTERED AGENT:

DocuSigned by:

Tushar Sharma

Tushar Sharma, M.D.

FILED**2023 DEC -5 AM 4:34****CLERK OF STATE
TALLAHASSEE, FL**