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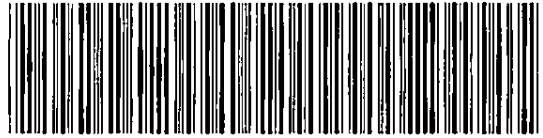
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/30/24 10:00 AM  
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**ATTORNEY KEVIN DOWNEY, P.A.**

7257 NW 4th Boulevard, #38  
Gainesville, Florida 32607

(352) 373 - 4554

[kidowney@bellsouth.net](mailto:kidowney@bellsouth.net)

October 25, 2024

Florida Department of State  
Division of Corporations  
2415 N. Monroe Street, Suite 810  
Tallahassee, Florida, 32303

Re: NCANES Anesthesia, P.L.L.C.

Please file the enclosed original signed Articles of Incorporation for the above - named professional limited liability company made effective today, October 25, 2024.

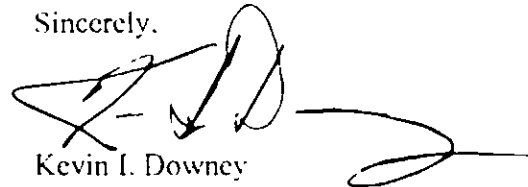
In addition, a check in the sum of \$125.00 is enclosed which represents the following fees:

Filing Fee	\$100.00
Registered Agent Fee	<u>\$ 25.00</u>
Total	<u>\$ 125.00</u>

Please contact my office at the above address with any questions on this filing.

Thank you.

Sincerely,



Kevin I. Downey

Enclosures (2)

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TALLAHASSEE, FL  
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## ARTICLES OF ORGANIZATION

OF

### **NCANES Anesthesia, PLLC**

The undersigned person, acting hereby as Organizer for the purpose of forming a professional limited liability company under the Florida Statutes, Chapter 605 and Chapter 621, hereby executes the following Articles of Organization.

**I NAME.** The name of the professional limited liability company shall be: **NCANES Anesthesia, PLLC** ("Company").

**II ADDRESS.** The initial mailing address and street address of the principal office of the Company shall be 421 SE Alfred Markham Street, Lake City, FL 32025.

**III DURATION.** The Company shall commence its existence on October 25, 2024. The Company's existence shall be perpetual, unless the Company is dissolved as provided in these Articles of Organization.

**IV PURPOSE.** The general nature and purposes of business to be transacted, promoted and carried on by the Company are as follows:

- a) To engage in every aspect of the practice of anesthesiology, and all its fields of specialty.
- b) To engage and render the professional services involved only through its officers, agents, and employees who shall be in good standing and duly licensed or otherwise legally authorized within the State of Florida to render the same professional service as this Company.
- c) To invest its funds in real estate, mortgages, stocks, bonds and any other type of investments permitted by law.
- d) To engage in no other business other than the rendition of the professional services specified herein.
- e) To do everything necessary and proper in accomplishing the purposes herein set forth and to do anything incidental thereto which is not forbidden under the laws of the State of Florida.

**V REGISTERED OFFICE AND AGENT.** The name of the registered agent of the Company in the State of Florida is William S. Jones and the street address of the registered office of the Company is 421 SE Alfred Markham Street, Lake City, FL 32025.

**VI MEMBERSHIP.** None of the membership units of this professional limited liability company may be issued to anyone other than: (a) an individual licensed to provide professional anesthesia services in the State of Florida, or (b) a Florida professional service corporation or Florida professional limited liability company wholly owned by an individual or individuals licensed to provide professional anesthesia services in the State of Florida.

**VII CAPITAL CONTRIBUTIONS.** The members of the Company shall contribute to the capital of the Company in cash or property. Each member shall make additional capital contributions to the Company only upon the unanimous consent of all the members.

**VIII ADMISSION OF NEW MEMBERS.** No additional members shall be admitted to the Company without the written consent of all the members of the Company and upon such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all of the members of the Company, other than the member proposing to dispose of his or her interest, approves of the proposed transfer by written consent.

**IX TERMINATION OF EXISTENCE.** The Company shall be dissolved upon the death, bankruptcy, or dissolution of a member or manager, or upon the occurrence of any other event that terminates the continued membership of a member in the Company. However, the business of the Company may be continued by the consent of all the remaining members.

**X MANAGEMENT.** The Company shall be manager managed in accordance with the Operating Agreement adopted by the members for the management of the business and affairs of the Company. The Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization.

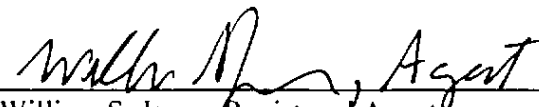
**XI INITIAL MANAGER.** The name and address of the initial Manager of the Company is William S. Jones, 421 SE Alfred Markham Street, Lake City, FL 32025.

**IN WITNESS WHEREOF,** the undersigned Organizer has executed these Articles of Organization on October 25, 2024.

  
William S. Jones, CRNA, Organizer

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the foregoing Articles of Organization, 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.

Dated: October 25, 2024

  
William S. Jones, Registered Agent