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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name

The name of the Limited Liability Company is:

### ANIMAL EYE SPECIALTY CLINIC, L.L.C.

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#### ARTICLE II - Address

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

> 2598 Forest Hill Blvd. West Palm Beach, FL 33406

#### **ARTICLE III - Duration**

The period of duration for the Limited Liability Company shall be: limited to a specific term commencing on the date of filing these Articles of Organization and ending on December 31, 2006.

ARTICLE IV - Management (Check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or managers and the names and addresses of such managers who are to serve as manager are:

X The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are;

> Susan Carastro 2598 Forest Hill Bivd. West Palm Beach, FL 33406

#### ARTICLE V - Registered Agent

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

Kim Skielnik 2598 Forest Hill Blvd. West Palm Beach, FL 33406

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#### **ARTICLE VI - Registered Office**

The street address of the initial registered office of the Limited Liability Company is:

2598 Forest Hill Blvd. West Palm Beach, FL 33406

#### **ARTICLE VII - Admission of Additional Members**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be: N/A

#### **ARTICLE VIII - Members' Rights to Continue Business**

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be: N/A

2-14-96

Date

(Signature of Member or the Authorized Representative of a Member)

#### **REGISTERED AGENT ACCEPTANCE**

Having been named as registered agent and to accept service of process for the abovestated Limited Liability Company at the address designated in this certificate pursuant to the provisions of Section 608.415, Florida Statutes, 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.

ANIMAL EYE SPECIALTY CLINIC, L.L.C.

Bv: SKIELNIK, Member 2.14.9 Date:

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## **CERTIFICATE OF FORMATION**

### OF

# ANIMAL EYE SPECIALTY CLINIC, L.L.C.

- 1. The name of the limited liability company is: ANIMAL EYE SPECIALTY CLINIC, L.L.C.
- 2. The address of its registered office is 2598 Forest Hill Bivd., West Palm Beach, FL 33406. The name of its registered agent at such address is Kim Skielnik.

IN WITNESS WHEREOF, the undersigned have executed this Certificate of Formation of ANIMAL EYE SPECIALTY CLINIC, L.L.C. this 274 day of \_\_\_\_\_\_\_\_, 1996.

ANIMAL EYE SPECIALTY CLINIC, L.L.C.

By: Kim Skielnik, Member

T. Carnot By:

Susan M. Carastro, Member

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## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of ANIMAL EYE SPECIALTY CLINIC, L.L.C., deposes and says:

- 1. The above named limited liability company has at least two members.
- 2. The total amount of cash contributed by the member(s) is \$20,000.
- 3. If any, the agreed value of property other than cash contributed by member(s) is \$85,000.
- 4. The total amount of cash or property anticipated to be contributed by member(s) is \$105,000. This total includes amounts from 2 and 3 above.

### ANIMAL EYE SPECIALTY CLINIC, L.L.C.

16 By: (quashi) SUSAN CARASTRO, Member By: KIM SKIELNIK, Member

D:\WPMONTGOME\2031.01\MEMBER.AFF

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

ANIMAL EYE SPECIALTY CLINIC, L.L.C.

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

Kim Skielnik 2598 Forest Hill Blvd. West Palm Beach, FL 33406



Having been named as registered agent and to accept service of process for the abovestated Limited Liability Company at the address designated in this certificate pursuant to the provisions of Section 608.415, Florida Statutes, I haraby 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.

ANIMAL EYE SPECIALTY CLINIC, L.L.C.

Bv: KIM'SKIELNIK, Member

Date:

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