

Document Number Only

297000000257

SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 Feb -19 PM 3:22

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

700002103847--9
-03/04/97--01088--016
****285.00 ****285.00

CORPORATION(S) NAME

Med-Tech Capital, LLC

☐ Profit

☒ NonProfit

(FL) Limited Liability Co.

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other UCC Filing

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Fict. Name

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Verifier
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W.P. Verifier

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2-19

308,611,1127,671

W97-4081



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 19, 1997

C T CORPORATION SYSTEM
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301

SUBJECT: MED-TECH CAPITAL, LLC
Ref. Number: W97000004081

We have received your document for MED-TECH CAPITAL, LLC and check(s) totaling \$285.00. However, your check(s) and document are being returned for the following:

The registered agent must sign accepting the designation.

An affidavit is required pursuant to section 608.407(2), Florida Statutes, declaring the following: (1) the limited liability company has at least two members; (2) the actual amount of cash contributions; (3) the agreed value of any property other than cash contributed; and (4) the total amount of cash or property anticipated to be contributed by the members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6972.

Doris Brown
Document Specialist

Letter Number: 697A00008902

3-3-97
Doris,
Please see changes
+ backdate to 2-19-97.
Thanks,
Jeannette/CT

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

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ARTICLE I - Name

The name of the Limited Liability Company is:

MED-TECH CAPITAL, LLC

ARTICLE II - Address

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

13860 Wellington Trace
Suite 506
West Palm Beach, FL 33414

ARTICLE III - Duration

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management

(check and complete the appropriate statement)

/ / The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Donald Jacobson, 11928 Maidstone Drive, West Palm Beach, FL 33414
David Brodsky, 2856 Hurlingham Drive, West Palm Beach, FL 33414

/ / The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

ARTICLE V - Registered Agent

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

C T CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, Florida 33324

ARTICLE VI - Registered Office

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

c/o C T CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, Florida 33324

***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:

***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:

2/14/97
(Date)

Wendy [Signature]
(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 above stated 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.

C T CORPORATION SYSTEM

By Connie Bryan
(Signature)
CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
(Type Name of Officer)

3/3/97
(Date)

(Title of officer)

*(If applicable)

(FLA. - LLC 3207)

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____

MED-TECH CAPITAL, LLC

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 \$ 10,000.-
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ N/A . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is \$ 100,000.- . This total includes amounts from 2 and 3 above.



Signature of a member or authorized representative of a member.
(In accordance with section 605.402(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILING FEE: \$ 250 for Articles of Organization and Affidavit