

L98000000 151

DOWD & BLOUNT

ATTORNEYS AND COUNSELORS

2828 WOODSIDE STREET
DALLAS, TEXAS 75204-2524
(214) 922-9330
FAX (214) 922-9372

Doreen L. Rebernak
Paralegal

November 18, 1997

Via United Parcel Service

Department of State
Division of Corporation
409 E. Gaines Street
Tallahassee, FL 32399

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-02/06/98--01015--006
****285.00 ****285.00

RE: *Articles of Organization; Total Wellness Opportunities, L.C.*

To Whom It May Concern:

Enclosed please find for filing, the original and one (1) copy of the *Articles of Organization for Florida Limited Liability Company: Total Wellness Opportunities, L.C.* Please file the original and return a file-stamped copy to me in the enclosed, self-addressed, stamped envelope. I am also forwarding a company check in the amount of \$285.00, in payment of the fees for filing the Articles and the Designation of Registered Agent.

Thank you for your assistance and if you have any questions, please call me.

Name	12/4/97
Availability	DCC
Document Examiner	DCC
Updater	DCC
Chief Clerk	tdlr
Enclosures	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

Very truly yours,



Doreen L. Rebernak

C. TAX	
FILING	285.00
R. AGENT FEE	
C. COPY	
W. P. VER	
N. BANK	
BALANCE DUE	
REFUND	

1998 FEB -5 AM 9:20

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L98000000 151

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2828 WOODSIDE STREET
DALLAS, TEXAS 75204-2524
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Doreen L. Rebernak
Paralegal

January 26, 1998

Via United Parcel Service

Ms. Diane Cushing, Corporate Specialist
Division of Corporations
Florida Department of State
409 E. Gaines Street
Tallahassee, FL 32399

RE: *Articles of Organization; Total Wellness Opportunities, L.C.*
Reference No. W97000027081

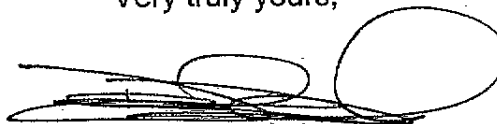
Dear Ms. Cushing:

Enclosed please find for filing the *Articles of Organization for Florida Limited Liability Company: Total Wellness Opportunities, L.C.*, revised in accordance with your letter of December 4, 1997. I am also forwarding a company check in the amount of \$285.00 for the fee for filing the Articles and the Designation of Registered Agent for Total Wellness Opportunities, L.C..

Please file the original and return a file-stamped copy to me in the enclosed, self-addressed, stamped envelope.

Thank you for your assistance and if you have any questions, please call me.

Very truly yours,



Doreen L. Rebernak

:dlr
Enclosures



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 4, 1997

DOREEN L. REBERNAK
DOWD & BLOUNT
2828 WOODSIDE STREET
DALLAS, TX 75204-2524

SUBJECT: TOTAL WELLNESS OPPORTUNITIES, L.C.
Ref. Number: W97000027081

We have received your document for TOTAL WELLNESS OPPORTUNITIES, L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$285.00.

A limited liability company may not serve as its own registered agent. Please designate an individual or an active entity, with a Florida street address. A post office box is not acceptable.

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 (850) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 997A00057304



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

January 30, 1998

DOREEN L. REBERNAK
DOWD & BLOUNT
2828 WOODSIDE STREET
DALLAS, TX 75204-2524

SUBJECT: TOTAL WELLNESS OPPORTUNITIES, L.C.
Ref. Number: W97000027081

We have received your document for TOTAL WELLNESS OPPORTUNITIES, L.C. and your check(s) totaling \$285.00. However, the document has not been filed and is being retained in this office for the following:

You failed to return the registered agents designation form. We told you in our previous letter that the limited liability company could not serve as its own registered agent and asked you to change it.

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 (850) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 998A00005419

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY:

TOTAL WELLNESS OPPORTUNITIES, L.C.

ARTICLE I – Name:

The Company is **Total Wellness Opportunities, L.C.**

ARTICLE II – Address:

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

10061 E. Broadview Drive
Bay Harbor Islands, Florida 33154

ARTICLE III – Duration:

The period of duration for the Limited Liability Company is until the close of the Company business on November 1, 2027, or until the earlier dissolution of the Company in accordance with the provisions of its regulations.

ARTICLE IV – Management:

☒ 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:

The Bernard and Antoinette Stern Loving Trust
10061 E. Broadview Drive
Bay Harbor Islands, Florida 33154

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

98 FEB -5 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of **Total Wellness Opportunities, 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: \$1000
- 3) if any, the agreed value of property anticipated to be contributed by member(s) is \$0
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$0
- 5) the total amounts of 2, 3 and 4 is \$1000



Signature of a member or authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

98 FEB -5 AM 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED


**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.

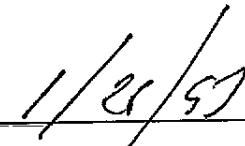
1. The name of the limited liability company is: **Total Wellness Opportunities, L.C.**
2. The name and address of the registered agent and office is:

**Bernard H. Stern, M.D.
20801 Biscayne Boulevard
Suite 400
Aventura, Florida 33180**

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, 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.



(Signature)



(Date)

FILED
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TALLAHASSEE
SECRETARY OF STATE

Filing Fee: \$35 for Designation of Registered Agent