

LA8000003282

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224-9115
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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. 00789-01117-00627-00671
(Corporation Name) (Document #)
2. W48-28320
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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DEPT. OF STATE
DIVISION OF CORPORATIONS
ALBUQUERQUE, NM

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

700002715557-4
-12/18/98-01027-012
*****8.75 *****8.75

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

700002715557-4
-12/18/98-01027-011
****337.50 ****337.50

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Name	<u>MK</u>
Availability	<u>MK</u>
Document Examiner	<u>MK</u>
Updater	<u>MK</u>
Classifier	<u>MK</u>
Verifier	<u>MK</u>
Acknowledgement	<u>MK</u>
P. Verifier	<u>MK</u>

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC 18 PM 3:50

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 18, 1998

AUSLEY LAW FIRM

SUBJECT: SURG TWO, L.L.C.
Ref. Number: W98000028320

We have received your document for SURG TWO, L.L.C. and your check(s) totaling \$346.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the entity's complete mailing address.

The document must contain the names and street addresses of the members or managers of the limited liability company.

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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 598A00059527

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560
Direct Line: 850/425-5484
Direct Fax: 850/222-7560

December 18, 1998

Secretary of State
409 East Gaines Street
Tallahassee, Florida 32301

VIA HAND DELIVERY

Re: Articles of Organization
SURG TWO, L.L.C.

Dear Madam/Sir:

Enclosed please find an original and one copy of the Articles of Organization for SURG TWO, L.L.C., a limited liability company. Also enclosed are original and one each of the Certificate Designating Registered Agent and Registered Office and the Affidavit of Membership and Contributions for this company.

Also enclosed is our client's check in the amount of \$337.50, which includes \$250.00 for the filing fee, \$35.00 for Designation of Registered Agent, and \$52.50 for a certified copy. I have also enclosed this firm's check in the amount of \$8.75 for a certificate of status.

Please do not hesitate to phone our office if there are any questions. We will have our messenger return to pick up the certified copy and the certificate of filing.

Thank you in advance for your usual assistance in these matters.

Sincerely,



Robert A. Pierce

RAP/dmw
Enclosures

cc: Thad Cofer (w/out encs.)

RAP\LTR\sos71330.s2\015432.71330

**ARTICLES OF ORGANIZATION
OF
SURG TWO, L.L.C.**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

1. Name. The name of the Limited Liability Company is **Surg Two, L.L.C.**
2. Period of Duration. The period of duration of the Limited Liability Company shall be from the date of filing until the first to occur of the following:
 - a. Fifty (50) years from the date of filing of these Articles of Organization with the Department of State; or
 - b. Dissolution of the Limited Liability Company pursuant to provisions of the Florida Limited Liability Company Act and the Limited Liability Company Regulations for **Surg Two, L.L.C.**
3. Purpose. The purpose for which the Limited Liability Company is organized is to acquire, own, finance, develop, improve, lease, operate, manage, sell and otherwise invest in, and deal with, improved and unimproved real estate, and interests related thereto, and to engage in any other activities related or incidental thereto.
4. Address of Mailing and Place of Business. The address of the place of business in Florida and mailing address for the Limited Liability Company are:

2500 Highway 77
Panama City, Florida 32405

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FLORIDA DEPARTMENT OF STATE

5. Registered Agent. The name and address of the initial registered agent in Florida for the Limited Liability Company is:

Thad W. Cofer
2500 Highway 77
Panama City, Florida 32405

6. Capital Contributions. The total amount of cash and a description and agreed value of property other than cash contributed to the Limited Liability Company is as follows: \$1,000.00 in cash. No other property will be contributed.

7. Additional Contributions. The total additional contributions, if any, agreed to be made by all members and the times at which, or the events upon the happening of which, they shall be made, are as follows: NONE.

Additional contributions, if any, will be made upon unanimous agreement by all of the members of the Limited Liability Company.

8. Additional Members. Additional members may be admitted to the Limited Liability Company as unanimously agreed by the Members.

9. Continuity of Business. Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member, the business of the Limited Liability Company shall not be continued unless the remaining Members unanimously agree to continue the Limited Liability Company.

10. Management. The Limited Liability Company shall be managed by a its members, who are:

Anthony L. Aker, O.D.

James E. Corry, Jr., O.D.

David J. Edinger, O.D.

Bret L. Fisher, M.D.

Lee G. Gonshor, M.D.

Mark S. Jones, O.D.

John J. Mallary, M.D.

Mailing address for all of the above is: 2500 Highway 77, Panama City, Florida 32405.

Executed at Panama City, Florida, on the 9th ^{November} day of ~~October~~, 1998.

Anthony L. Aker
ANTHONY L. AKER, O.D., Member

James E. Corry Jr.
JAMES E. CORRY, JR., O.D., Member

David J. Edinger
DAVID J. EDINGER, O.D., Member

Bret L. Fisher
BRET L. FISHER, M.D., Member

Lee G. Gonshor
LEE G. GONSHOR, M.D., Member

Mark S. Jones
MARK S. JONES, O.D., Member

John J. Mallary
JOHN J. MALLARY, M.D., Member

STATE OF FLORIDA
COUNTY OF BAY

^{November} The foregoing instrument was acknowledged before me this 9th day of ~~October~~, 1998, by **ANTHONY L. AKER, O.D.** Such person: (☒) is personally known to me; () produced a current Florida driver's license as identification; () produced _____ as identification.



(Notarial Seal)

Joy H. Maddox
(Signature of Notary Public)

Joy H. Maddox
(Typed or Printed Name of Notary Public)

STATE OF FLORIDA
COUNTY OF BAY

^{November} The foregoing instrument was acknowledged before me this 9th day of ~~October~~, 1998, by **JAMES E. CORRY, JR., O.D.** Such person: (☒) is personally known to me; () produced a current Florida driver's license as identification; () produced _____ as identification.

(Notarial Seal)

Joy H. Maddox
(Signature of Notary Public)

Joy H. Maddox
(Typed or Printed Name of Notary Public)



JOY H. MADDOX
My Commission CC482105
Expires Jul. 21, 1999
Bonded by HAI
800-422-1555

STATE OF FLORIDA
COUNTY OF BAY

November The foregoing instrument was acknowledged before me this 9th day of October, 1998, by **DAVID J. EDINGER, O.D.** Such person: (☒) is personally known to me; () produced a current Florida driver's license as identification; () produced _____ as identification.



JOY H MADDOX
My Commission CC482105
Expires Jul. 21, 1999
Bonded by HAI
800-422-1555

Joy H. Maddox
(Signature of Notary Public)

Joy H. Maddox
(Typed or Printed Name of Notary Public)

STATE OF FLORIDA
COUNTY OF BAY

November The foregoing instrument was acknowledged before me this 9th day of October, 1998, by **BRET L. FISHER, M.D.** Such person: (☒) is personally known to me; () produced a current Florida driver's license as identification; () produced _____ as identification.



JOY H MADDOX
My Commission CC482105
Expires Jul. 21, 1999
Bonded by HAI
800-422-1555

Joy H. Maddox
(Signature of Notary Public)

Joy H. Maddox
(Typed or Printed Name of Notary Public)

STATE OF FLORIDA
COUNTY OF BAY

November The foregoing instrument was acknowledged before me this 9th day of October, 1998, by **LEE G. GONSHOR, M.D.** Such person: (☒) is personally known to me; () produced a current Florida driver's license as identification; () produced _____ as identification.

(Notarial Seal)

Joy H. Maddox
(Signature of Notary Public)

Joy H. Maddox
(Typed or Printed Name of Notary Public)



JOY H MADDOX
My Commission CC482105
Expires Jul. 21, 1999
Bonded by HAI
800-422-1555

STATE OF FLORIDA
COUNTY OF BAY

November
The foregoing instrument was acknowledged before me this 9th day of ~~October~~, 1998, by **MARK S. JONES, O.D.** Such person: (☒) is personally known to me; (☐) produced a current Florida driver's license as identification; (☐) produced _____ as identification.



JOY H MADDUX
My Commission CC482105
Expires Jul. 21, 1999
Bonded by HAI
800-422-1555

Joy H. Maddox
(Signature of Notary Public)

Joy H. Maddox
(Typed or Printed Name of Notary Public)

STATE OF FLORIDA
COUNTY OF BAY

November
The foregoing instrument was acknowledged before me this 9th day of ~~October~~, 1998, by **JOHN J. MALLARY, M.D.** Such person: (☒) is personally known to me; (☐) produced a current Florida driver's license as identification; (☐) produced _____ as identification.

(Notarial Seal)

Joy H. Maddox
(Signature of Notary Public)

Joy H. Maddox
(Typed or Printed Name of Notary Public)



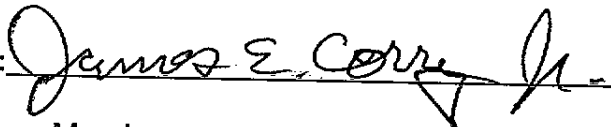
JOY H MADDUX
My Commission CC482105
Expires Jul. 21, 1999
Bonded by HAI
800-422-1555

**CERTIFICATE DESIGNATING REGISTERED AGENT
AND REGISTERED OFFICE**

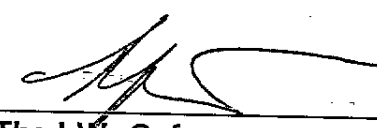
In compliance with Section 608.415, Florida Statutes, the following is submitted:

SURG TWO, L.L.C., desiring to organize as a Limited Liability Company under the laws of the State of Florida, has designated 2500 Highway 77, Panama City, Florida 32405, as its initial Registered Office and has named Thad W. Cofer, located at said address, as its initial Registered Agent.

SURG TWO, L.L.C.

By: 
Member

Having been named Registered Agent and to accept service of process for the above-stated corporation, at the place designated in this Certificate, the undersigned hereby accepts said appointment 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 his duties and is familiar with and accepts the obligations of his position as Registered Agent.


Thad W. Cofer
Registered Agent

Date: 11/9/98

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS
SURG TWO, L.L.C.

The undersigned member or authorized representative of a member of **Surg Two, 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 \$1,000.00.
3. If any, the agreed value of property other than cash contributed by member(s) is \$ -0-.
4. The total amount of cash or property anticipated to be contributed by member(s) is \$1,000.00. This total includes amounts from 2 and 3 above.

By: _____

Member