

L99000003024



ACCOUNT NO. : 072100000032

REFERENCE : 254215 5379C

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 337.50

ORDER DATE : May 26, 1999

ORDER TIME : 10:32 AM

300002887103-13

ORDER NO. : 254215-005

CUSTOMER NO: 5379C

CUSTOMER: Mr. V. Jean Owens  
HARRIS BARRETT MANN & DEW  
HARRIS BARRETT MANN & DEW  
811b Cypress Village Blvd.

Ruskin, FL 33573

DOMESTIC FILING

NAME: TAMPA BAY MEDICAL INVESTMENT,  
LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
     CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

Name	<i>5/26/99</i>
Availability	<i>XX</i>
Document	<i>DCC</i>
Examiner	<i>DCC</i>
Updater	<i>DCC</i>
Updater Verifier	<i>DCC</i>
Acknowledgement	<i>DCC</i>
W. P. Verifier	<i>DCC</i>

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS: \_\_\_\_\_

FILED  
99 MAY 26 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

L99000003024

**ARTICLES OF ORGANIZATION FOR  
TAMPA BAY MEDICAL INVESTMENT, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is: **TAMPA BAY MEDICAL INVESTMENT, LLC.**

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: **811-B Cypress Village Boulevard, Ruskin, Florida 33573.**

**ARTICLE III - DURATION**

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Regulations.**

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

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TALLAHASSEE, FLORIDA

Ignacio Ferras  
4806 Londonderry Drive  
Tampa, FL 33647

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

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

**Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Regulations.**

**ARTICLE VI - 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: **Only with the consent of all the remaining Members.**

IN WITNESS WHEREOF, these Articles of Incorporation have been signed, as Managing Member, by: **IGNACIO FERRAS.**

Dated this 25 day of May, 1999.

  
**IGNACIO FERRAS**  
Managing Member

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 25<sup>th</sup> day of May, 1999, by **IGNACIO FERRAS**, who is personally known to me or who has produced a Drivers License as identification.



Joyce L. Ekholm  
MY COMMISSION # CC827243 EXPIRES  
April 18, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

*Joyce L. Ekholm*  
Printed Name: Joyce L. Ekholm  
Notary Public  
My Commission Expires: 4/18/03  
Serial Number:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: **TAMPA BAY MEDICAL INVESTMENT, LLC.**
2. The name and address of the registered agent and office is:

**IGNACIO FERRAS  
4806 Londonderry Drive  
Tampa, FL 33647**

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.

  
**IGNACIO FERRAS**

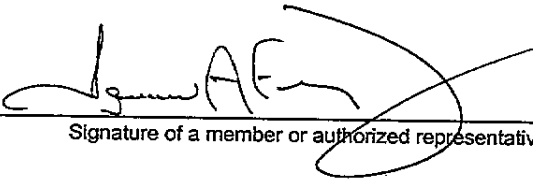
25 May 99  
Date

99 MAY 25 PM 1:30  
TALLAHASSEE  
STATE  
SECRETARY  
FLORIDA

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of **TAMPA BAY MEDICAL INVESTMENT, 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 members is: \$500,000.00
3. If any, the agreed value of property other than cash contributed by members is:  
(A description of the property is attached and made a part hereto) \$0
4. The amount of cash or property anticipated to be contributed by members is: \$0
5. The total amounts of 2, 3 and 4 is: \$500,000.00

  
\_\_\_\_\_  
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.)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA