

R L L P REGISTRATION

STATE OF ALABAMA

Check one:

☒ DOMESTIC LIMITED LIABILITY PARTNERSHIP

☐ FOREIGN LIMITED LIABILITY PARTNERSHIP

Inst # 1997-01421

1. Name of Partnership: Double Oak Family Medicine, L.L.P.
(must contain words Registered Limited Liability Partnership or abbreviations LLP or L.L.P.)
 - 1a. If foreign LLP, name under which foreign LLP wishes to register, if different from legal name: _____
2. State or jurisdiction where partnership was formed: Alabama Filing Date: _____
3. Street address of principal office: 5420 Highway 280 East, Birmingham, Alabama 35242
(Include mailing address, if different)
4. Name and street address of registered agent in Alabama: Harvey Harmon, M.D. 5420 Highway 280 East, Birmingham, Alabama 35242
(Include mailing address, if different)
5. Statement of nature of Business: Medical Practice
6. The above named partnership hereby registers as a **Registered Limited Liability Partnership** under the Alabama Partnership Act of 1996.
7. Additional information as necessary may be given by attaching additional pages.
8. This registration shall be executed and filed by one or more partners so authorized.
9. Registration of *domestic* LLP shall be accompanied by filing fees of \$35.00 for the Judge of Probate and \$40.00 for the Secretary of State and **shall be filed with the Judge of Probate** of the county in which the principal office is located.
10. Registration of *foreign* LLP shall be accompanied by filing fees of \$40.00 for the Secretary of State and a certificate of status from the filing office of the state or jurisdiction of registration and **shall be filed with the Secretary of State by mailing to P.O. Box 5616, Montgomery, AL 36103-5616.**

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ParkPlace/266825.01

01/14/1997-01421
01:36 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
002 HCB 80.00

11. Registration is effective at time of filing unless otherwise stated.

DATE: January 14, 1997

BY: Harvey D Harmon M.D.
Name: Harvey Harmon, M.D.
Title: General Partner

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