

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L10000025350  
FILED 8:00 AM  
March 08, 2010  
Sec. Of State  
tcline

**Article I**

The name of the Limited Liability Company is:  
UNITED MEDICAL INSTITUTE,LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
849 KAZAROS CIR.  
OCOEE, FL. 34761

The mailing address of the Limited Liability Company is:  
PO BOX 529 WINDERMERE  
WINDERMERE, FL. 34786

**Article III**

The purpose for which this Limited Liability Company is organized is:  
CERTIFIED NURSING ASSISTANT COURSES CNA PREP. TRAINING,  
EKG, CPR, ACLS PHLEBOTOMY AND PHARMACY TECH.

**Article IV**

The name and Florida street address of the registered agent is:  
WILFRID MONDE  
849 KAZAROS CIR  
OCOEE, FL. 34761

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.

Registered Agent Signature: WILFRID MONDE

### **Article V**

The name and address of managing members/managers are:

Title: MGR  
ETIENNE D PIERRE MGR  
849 KAZAROS CIR  
OCOEE, FL. 34761

Title: MGR  
CHANTAL MONDE  
849 KAZAROS CIR  
OCOEE, FL. 34761

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### **Article VI**

The effective date for this Limited Liability Company shall be:

03/05/2010

Signature of member or an authorized representative of a member

Signature: CHANTAL MONDE