L01000004512

Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000029777 9)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
01 MAR 23 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:
Division of Corporations
Fax Number : (850)922-4003

From:
Account Name : KATZ, BARRON, SQUITERO & FAUST, P.A.
Account Number : 072627002473
Phone : (305)856-2444
Fax Number : (305)285-9227

AL

RECEIVED
01 MAR 23 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

MANOR PINES CONVALESCENT CENTER, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	$160.00

Fax Audit No. H01000029777 9

ARTICLES OF ORGANIZATION
OF
MANOR PINES CONVALESCENT CENTER, LLC

The undersigned, desiring to form a limited liability company (hereinafter the "Company") under and pursuant to Florida Statute 608 entitled the Florida Limited Liability Company Act (the "Act"), does hereby adopt the following Articles of Organization for the Company:

ARTICLE I
NAME

The name of the Company is **MANOR PINES CONVALESCENT CENTER, LLC.**

FILED
01 MAR 23 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II
ADDRESS

The mailing address and principal business address of the Company is **1701 N.E. 26th Street, Wilton Manors, Florida 33305.**

ARTICLE III
INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is **1601 N.E. 26th Street, Wilton Manors, Florida 33305**, and the name of the initial registered agent of the Company at that address is **RALPH A. MARRINSON.**

ARTICLE IV
DURATION AND EFFECTIVE DATE

The Company shall commence its existence on the date these Articles of Organization are filed with the Florida Department of State. The period of the Company's duration shall be perpetual, unless the Company is dissolved earlier pursuant to the provisions of the Regulations of the Act.

Fax Audit No. H01000029777 9
This instrument prepared by:
Richard B. Ivans, Esq.
Fla. Bar No. 137540
KATZ, BARRON, SQUITERO & FAUST, P.A.
2699 South Bayshore Drive, 7th floor
Miami, Florida 33133
(305)856-2444

FILED
01 MAR 23 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V
MANAGEMENT OF COMPANY

Management of the Company shall be vested in the Manager(s) and it is, therefore, a manager-managed company.

ARTICLE VI
PURPOSE CLAUSE

The Company's business and purpose shall be to operate, on property that is either owned or leased by the Company, a licensed, skilled nursing facility and to engage in such other lawful activities as are incidental, necessary or appropriate to the foregoing.

IN WITNESS WHEREOF, the undersigned member has hereunto set his hand and seal this 22nd day of March, 2001.

MEMBER:
MARRINSON GROUP, INC., a Florida corporation

By:______________________
RALPH A. MARRINSON, President

[CORPORATE SEAL]

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the Articles of Organization, I hereby accept this 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 this position as registered agent.

IN WITNESS WHEREOF, as said registered agent, I have caused this Statement to be

Fax Audit No. H01000029777 9

signed on this 22nd **day of March, 2001**

RALPH A. MARRINSON

[illegible]

FILED
01 MAR 23 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA