Florida Department of State

Division of Corporations
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To:

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

From:

Account Name : CAMMER, Lipsite and Poller P.A.

Account Number : 075410001624 Phone : (305)442-4994 Fax Number : (305)442-2399

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Audit No.

ARTICLES OF ORGANIZATION OF PROFESSIONAL PARK REHABILITATION CENTRE LLC.

The undersigned hereby forms a limited liability company under the Florida Limited Liability Company Act and adopt as the Articles of Organization of such limited liability company the following:

The name of the limited liability company:
 PROFESSIONAL PARK REHABILITATION CENTRE LLC.

(the "Company")

II. The period of its duration:

Perpetual effective from the date of filing of these Articles of Organization with the Secretary of State of the State of Florida.

III. The purpose for which the limited liability company is organized:

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

IV. A. The mailing address of the principal place of business in Florida:

1140A East Hallandale Beach Boulevard Hallandale, Florida 33009

B. The name and address of the Registered Agent in Florida:

Keith Schwartz 1140A East Hallandale Beach Boulevard Hallandale, Florida 33009

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V. The total amount of cash contributed is:

Keith Schwartz

\$100.00 cash

The total additional contributions, if any, agreed to be made by all Members VI. and the times at which or events upon the happening of which they shall be made:

Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

The right, if given, of the Members to admit additional Members, and the VII. terms and conditions of the admission:

Additional Members may be admitted at such times and on such terms and conditions as all Members may unanimously agree and as provided in the Operating Agreement of the Company.

The right, if given, of the remaining Members of the limited liability company VIII. to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the ilmited liability company:

The Company shall not continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in the Company.

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IX. Management:

Management of the Company is reserved to the Members. The names and addresses of the sole Member is:

Keith Schwartz 1140A East Hallandale Beach Boulevard Hallandale, Florida 33009

Dated: April __6___, 2000

The undersigned for the purpose of forming a limited liability Company to do business in the State of Florida does make and file these Articles of Organization, hereby declaring and certifying that the facts stated above are true and correct.

Keith Schwartz

The undersigned hereby accepts the foregoing designation as initial Registered Agent, is familiar with, accepts and agrees to comply with the provision of law applicable to such designation.

Keith Schwarz

STATE OF FLORIDA COUNTY OF

The foregoing instrument was acknowledged before me this 66 day of April, 2000, by Keith Schwartz. He is personally known to me or has produced a as identification.

My Commission Expires:

OFFICIAL NOTARY SEAL
ESPERANZA RAMIREZ
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO CC606626
MYCOMMISSION EXP DEC 9,21011

ARC. 9.00

Notary Public - State of Florida
Print Name: 65060000
Commission Number: CC 606006

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