



THE UNITED STATES  
CORPORATION  
COMPANY

L0000000/3576

ACCOUNT NO. : 072100000032

REFERENCE : 887869 7109980

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : November 6, 2000

ORDER TIME : 9:43 AM

ORDER NO. : 887869-005

CUSTOMER NO: 7109980

300003452753--8

CUSTOMER: David Wolfe, Esq  
David L. Wolfe, Esq

Suite 220  
28000 Spanish Wells Boulevard  
Bonita Springs, FL 34135

DOMESTIC FILING

NAME: JE-MED SUPPLIES AND SERVICES,  
L.C.

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kim Clemons - EXT. 1158

EXAMINER'S INITIALS:

RECEIVED  
DEPARTMENT OF REVENUE  
DIVISION OF SECURITIES  
ALL APPLICATIONS  
NOV - 6 AM 10:42  
TO REGISTER  
SUFFICIENCY OF FILING

JB  
HFL-00

ARTICLES OF ORGANIZATION

OF

JE-MED SUPPLIES AND SERVICES, L.C.

A Limited Liability Company organized under Chapter 608, Florida Statutes.

The undersigned, being one (1) of the initial members of a limited liability company to be formed under the Florida Limited Liability Company Act (the "Act"), hereby adopts these, the following Articles of Organization:

FIRST: The name of the limited liability company (the "Company") is: JE-MED SUPPLIES AND SERVICES, L.C.

SECOND: The duration of the Company's existence shall be thirty (30) years from the date these Articles are filed with the Department of State of the State of Florida, unless earlier terminated as provided in Article SIXTH of these Articles.

THIRD: The mailing address and the street address of the Company's principal office is 3679 Olde Cottage Lane, Bonita Springs, Florida 34134.

FOURTH: The name and street address of the Company's initial registered agent in the State of Florida shall be David L. Wolfe, Esq., 28000 Spanish Wells Blvd., Suite 220, Bonita Springs, Florida 34135.

FIFTH: Additional members may be admitted to the Company upon the approval of, and upon such terms and conditions, including whether any such additional members shall have management authority, as shall be established by members of the Company holding not less than a majority of the percentage shares of interest of the Company.

SIXTH: The Company shall be dissolved upon the death, insanity, bankruptcy,

DO NOT  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
NOV - 6 PM 12:23

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AND  
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retirement, resignation, expulsion, or dissolution of any member; provided, however, that members then holding not less than a majority of the remaining percentage shares of interest of the Company may consent to the continuance of the Company's business notwithstanding the death, insanity, bankruptcy, retirement, resignation, expulsion, or dissolution of any member. Further, the Company shall be dissolved upon unanimous agreement of all members.

SEVENTH: The Company is to be a manager-managed company, who shall be elected by the members, and the name and address of the initial manager, as General Manager, is as follows:

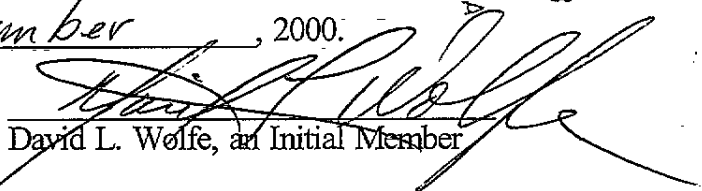
Edmund J. Schick  
3679 Olde Cottage Lane  
Bonita Springs, FL 34134

who shall serve until the first meeting of members, or until his successor is elected and qualified.

EIGHTH: The members of the Company shall enter into a Membership & Operating Agreement to provide regulations for the affairs of the Company, and other matters concerning their relative rights and obligations; provided, however, that said operating agreement shall not contravene these Articles or the Act.

NINTH: The purpose or purposes for which the Company is organized are: To engage in the transaction of any and all business in which limited liability companies may engage under the provisions of the Act.

IN WITNESS WHEREOF, the undersigned, being one (1) of the initial members of the Company, for the purpose of forming a limited liability company under the Act, has executed these Articles, this 3rd day of November, 2000.

  
David L. Wolfe, an Initial Member

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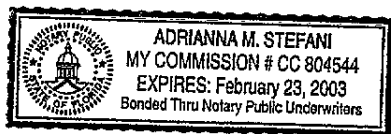
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STATE OF FLORIDA

COUNTY OF LEE

Sworn to and subscribed before me this 3 day of November, 2000,  
by David L. Wolfe.

(Seal)



Adrianna M Stefani  
Signature of Notary Public

Adrianna M. Stefani  
Print Name of Notary

My commission expires: 2-23-2003

Personally Known ✓ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

I, David L. Wolfe, Esq., having been designated to act as registered agent of JE-MED SUPPLIES AND SERVICES, L.C., a Florida limited liability company, simultaneously with such designation hereby agree to act in this capacity; and, state that I am familiar with, and accept the obligations of that position as provided for in the Act.

David L. Wolfe  
David L. Wolfe, Esq., Registered Agent

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