

FROM: HOLLAND & KNIGHT

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY
LEVIN HEALTH SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION
OF
LEVIN HEALTH SERVICES, LLC

ARTICLE I

Name

The name of the limited liability company is LEVIN HEALTH SERVICES, LLC.

ARTICLE II

Address

The mailing address and street address of the principal office of the limited liability company is:

921 North Main Street
Kissimmee, Florida 34744


ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Swantje Knye-Levin
921 North Main Street
Kissimmee, Florida 34744

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 as provided for in Chapter 608, F.S.


Swantje Knye-Levin, Registered Agent

This instrument prepared by:
Stephen R. Looney
FL BAR 0628344
200 South Orange Avenue, Suite 2600
Orlando, FL 32801
(407) 244-1148

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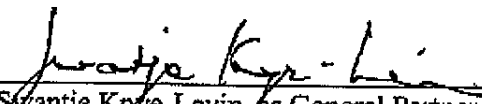
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ARTICLE IV
Management

The limited liability company is to be managed by one (1) or more managers and is, therefore, a manager-managed company. The initial manager of the limited liability company will be SWANTJE KNYE-LEVIN.

Dated this 22nd day of December, 2000.


Swantje Knye-Levin, as General Partner of the
Levin Family Partnership, Ltd., the Sole Member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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