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THE UNITED STATES **CORPORATION** ACCOUNT NO.: 07210000032 REFERENCE : 117327AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: April 16, 2001 ORDER TIME : 10:42 AM ORDER NO. : 117337-001 200004032882--3 CUSTOMER NO: 7268099 CUSTOMER: Mr. Senter-7268099 Mr. Jeffrey S. Senter 857 Sand Creek Circle Weston, FL 33327 DOMESTIC FILING NAME: DR. WAYNE MANTEL, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 1114

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DR. WAYNE MANTEL, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

318 Indian Trace, Suite 610, Weston, Florida 33326

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Sandra Senter
Name
1076 Creekford Drive
Florida street address (P.O. Box NOT acceptable)
Weston FL 33326
City, State, and Zip

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.. Sandra Senter

> By: see attached Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

> (An additional article must be added if an effective date is requested) Signature of a member or an authorized representative of a 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.) Laura R. Duniap

as its agent

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

30.00 Certified Copy (OPTIONAL)

5.00 Certificate of Status (OPTIONAL)



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ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN THE ARTICLES OF ORGANIZATION

Sandra Senter, an individual residing in this state, having a business office identical with the registered office of the limited liability company named below, and having been designated as the Registered Agent in the above and foregoing Articles of Organization:

DR. WAYNE MANTEL, LLC

Sandra Senter is familiar with and accepts the obligations of the position of Registered Agent under Section 608, Florida Statutes.

Typed Name: Sandra Senter

sal



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LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of DR. WAYNE MANTEL, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder. ·

This Limited Power of Attorney is executed on this 12 day of April

Wagne Print Name of Signer

WITNESS:

Print Name of Witness

WITNESS: