

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L01000011811
FILED
July 18, 2001
Sec. Of State**

Article I

The name of the Limited Liability Company is:

HEALTH CARE OPTIONS, LLC

Article II

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

951 ARDEN STREET
LONGWOOD, FL. 32750

The mailing address of the Limited Liability Company is:

951 ARDEN STREET
LONGWOOD, FL. 32750

Article III

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

CHATRICK L CLARK
951 ARDEN STREET
LONGWOOD, FL. US 32750

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.

Registered Agent Signature: CHATRICK L. CLARK

Article IV

The Limited Liability Company is a manager managed company

Article V

The name and address of members/managers are:

Title: MGRM
CHATRICK L CLARK
951 ARDEN STREET
LONGWOOD, FL. 32750

Signature of member or an authorized representative of a member

Signature: CHATRICK L. CLARK