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PETERSON & MYERS, P.A.  
ATTORNEYS AT LAW

J. HARDIN PETERSON, SR. (1894-1978)  
MICHAEL W. CREWS (1941-1991)

M. DAVID ALEXANDER, III  
PHILIP O. ALLEN  
GREGORY K. ATKINSON  
JACK P. BRANDON  
DEBRA L. CLINE  
J. DAVIS CONNOR  
ROY A. CRAIG, JR.  
CLINTON A. CURTIS  
BEN H. DARBY, JR.  
JACOB C. DYKXHOORN  
JOSEPH A. GEARY  
CHRISTY F. HARRIS  
JONN D. HOPPE

LAKELAND-MAIN ST.  
(863) 683-6511 OR  
(863) 676-6934  
FAX (863) 682-8031

PO BOX 7008  
WINTER HAVEN, FLORIDA 33883-7608

141 5TH STREET, NW  
WINTER HAVEN, FLORIDA 33881  
(863) 294-3360  
FAX (863) 299-5498

LAKELAND-S. FLA. AVE.  
(863) 683-7567  
FAX (863) 688-8099

October 8, 2001

LAKE WALES  
(863) 676-7611 OR  
(863) 683-8942  
FAX (863) 676-0643

DENNIS P. JOHNSON  
KRISTEN B. KIEFFER  
KEVIN C. KNOWLTON  
CEDRIC E. LEWIS  
DOUGLAS A. LOCKWOOD, III  
WILLIAM M. MIDYETTE, III  
DAVID A. MILLER  
CORNEAL B. MYERS  
E. BLAKE PAUL  
ROBERT E. PUTERBAUGH  
THOMAS B. PUTNAM, JR.  
DEBORAH A. RUSTER  
STEPHEN R. SENN  
ANDREA TEVES SMITH  
KEITH H. WADSWORTH  
KERRY M. WILSON

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32301

RE: PEAKSIDE PHYSICAL THERAPY, LLC

Gentlemen:

Enclosed for filing please find the Articles of Organization for the above-referenced Florida limited liability company.

Also enclosed is a check in the amount of \$155.00 for the filing fee and the cost of a certified copy.

If anything further is needed, please let me know. Otherwise, please forward the certified copy to me at the above Winter Haven address.

Sincerely,

*Kerry M. Wilson*  
K. K.

KERRY M. WILSON

:pk

Enclosures

xc: Jane A. Rowan, w/e

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**ARTICLES OF ORGANIZATION  
FOR  
PEAKSIDE PHYSICAL THERAPY, LLC,  
A Florida Limited Liability Company**

The undersigned, desiring to form a professional limited liability company under and pursuant to Chapters 608, Florida Statutes, the Florida Limited Liability Company Act, and Chapter 621, does hereby adopt the following Articles of Organization for such Company:

**ARTICLE I**

**Name**

The name of this Company shall be **PEAKSIDE PHYSICAL THERAPY, LLC.**

**ARTICLE II**

**Duration**

The term of existence of the Company shall be perpetual.

**ARTICLE III**

**Mailing and Street Address**

The mailing and street address of the Company is: 255 Citrus Tower Boulevard, Suite 202, Clermont, FL 34711.

**ARTICLE IV**

**Registered Agent and Office**

The name and street address of the initial registered agent and office for this Company is as follows: Jane A. Rowan, 255 Citrus Tower Boulevard, Suite 202, Clermont, FL 34711.

**ARTICLE V**

**Admission of Additional Members;  
Terms and Conditions of such Admissions**

Additional Members may be admitted upon unanimous consent of the Members of the Company, upon the written application of such new Member, in the manner set forth in the Operating Agreement of this Company and in accordance with applicable law.

**ARTICLE VI**

**Management of Company**

The Company is to be managed by its Members.

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**ARTICLE VII**  
**Amendment of Articles of Organization**

Any amendment to these Articles of Organization shall be on such form prescribed by the Secretary of State of the State of Florida containing such terms and provisions consistent with Chapter 608, Florida Statutes, as shall be prescribed by the Department of State, and shall be signed and sworn to by all Members of the Company. In the event a new Member is added by such amendment, it shall be also signed by the Member to be added.

**ARTICLE VIII**  
**Transferability of Member's Interest**

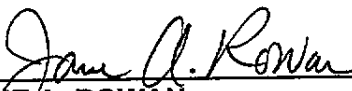
An interest of a Member of this Company may be transferred or assigned only to such extent and in the manner provided in the Operating Agreement of the Company and in accordance with applicable law.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand this 7<sup>TH</sup> day of October, 2001.

  
\_\_\_\_\_  
JANE A. ROWAN, a Member of the Company

**STATEMENT OF REGISTERED AGENT**

Having been named as Registered Agent and to accept service of process for the above-stated limited liability company, 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 the accept the obligations of my position as Registered Agent as provided in Chapter 608, Florida Statutes.

  
\_\_\_\_\_  
JANE A. ROWAN

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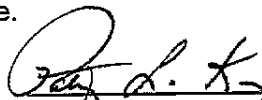
STATE OF FLORIDA  
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 8<sup>th</sup> day of October, 2001, by JANE A. ROWAN, who is personally known to me.

(SEAL)



Patsy L. King  
MY COMMISSION # CC677350 EXPIRES  
October 19, 2001  
BONDED THRU TROY FAIR INSURANCE, INC

  
\_\_\_\_\_  
NOTARY PUBLIC

Print Name of Notary

My Commission Expires: