BRUCE BRASHEAR
WILLIAM CLAYTON MARTIN III

October 26, 2001

Secretary of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: WELLNESS INVESTORS, L.L.C.

700004659567---7 -10/30/01--01078--002 \*\*\*\*155.00 \*\*\*\*155.00

Gentlemen:

Please find the original and one (1) copy of the Articles of Organization for the above-referenced limited liability company, as well as our check in the amount of \$155.00 representing the following:

Filing Fee \$100.00 Certificate Designating Resident Agent 25.00 Certified Copy of Articles of Organization 30.00

After filing the original Articles of Organization, please certify the enclosed copy and return same to this office.

Sincerely,

BRASHEAR & ASSOCIATES, P.L.

By:

Carrie Fagan, Legal Assistant

Enclosures

# ARTICLES OF ORGANIZATION OF WELLNESS INVESTORS, L.L.C.

The undersigned members adopt the following Articles of Organization pursuant to the provisions of the Florida Limited Liability Company Act (the "Act").

### ARTICLE I NAME OF COMPANY

The name of the limited liability company is WELLNESS INVESTORS, L.L.C. (the "Company").

### ARTICLE II PERIOD OF DURATION

The Company shall terminate on July 31, 2101.

### ARTICLE III REGISTERED OFFICE AND AGENT

The address of the Company's principal office and mailing address is as follows: 3204 NW 57<sup>th</sup> Terrace, Gainesville, FL 32606. The name and address of the Company's initial registered agent in the State of Florida is as follows: David E. Fowler, 3204 NW 57<sup>th</sup> Terrace, Gainesville, FL 32606

# ARTICLE IV REQUIREMENTS FOR ADMISSION OF ADDITIONAL MEMBERS

Additional persons may be admitted to the Company as members and membership interests may be created and issued to these persons in accordance with the Company's Operating Agreement.

# ARTICLE V DISSOLUTION AND RIGHT TO CONTINUE BUSINESS

The Company shall be dissolved upon the first to occur of the following:

- (a) The expiration of the term of the Company;
- (b) The unanimous written consent of all the Company's members;
- (c) The death, retirement, resignation, expulsion, dissolution or bankruptcy of a member, or any other event which terminates the membership of a member in the Company, <u>unless</u> within

ninety (90) days after such event all of the remaining members agree in writing to continue the business of the Company.

#### ARTICLE VI MANAGEMENT

The Company will be managed by Wellness Enterprises, L.L.C., a Delaware limited liability company, in accordance with the Company's regulations. The name and business address of the manager is Wellness Enterprises, L.L.C., 3204 NW 57<sup>th</sup> Terrace, Gainesville, FL 32606.

### ARTICLE VII PURPOSE

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

IN WITNESS WHEREOF, THE FOLLOWING MEMBER HAS EXECUTED THESE ARTICLES OF ORGANIZATION ON THIS 29 DAY OF OCTOBER, 2001.

WELLNESS ENTERPRISES, L.L.C.

DAVID E. FOWLER, Manager

OCT 30 PI

### STATE OF FLORIDA COUNTY OF ALACHUA

Before me personally appeared DAVID E. FOWLER, Manager of Wellness Enterprises, L.L.C., who is known to me to be the person who executed the foregoing Articles of Organization on behalf of Wellness Investors, L.L.C.

In witness whereof, I have hereunto set my hand and seal on this day of October, 2001.

Notary Public, State at Large

Printed Name

My Commission Expires:

Carrie P. Fagan
MY COMMISSION # CC993032 EXPIRES
January 10, 2005
BONDED THRU TROY FAIN INSURANCE, INC.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: WELLNESS INVESTORS, L.L.C.
- 2. The name and address of the registered agent and office is:

DAVID E. FOWLER 3204 NW 57<sup>th</sup> Terrace Gainesville, FL 32606

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.

DAVID E. FOWLER, Registered Agent

Date: October 29, 2001

01 OCT 30 PM 5: 00
SECRETARY OF STATE