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OF COUNSEL  
JAMES M. ORMAN

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December 28, 2001

**VIA OVERNIGHT DELIVERY**

Florida Secretary of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

300004745603--0  
-12/31/01--01086--008  
\*\*\*\*125.00 \*\*\*\*125.00

Re: **MEDSA, LLC**

Dear Sir/Madam:

Enclosed herewith for filing are two (2) executed Articles of Organization for the above-referenced limited liability company.

Further enclosed is a check in the amount of One Hundred Twenty-five Dollars (\$125.00) representing payment for the filing of the Articles.

Please notify me upon filing.

Sincerely,

*Tara M. Panchella*

Tara M. Panchella

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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Encl.

*2p*

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: MEDSA, LLC

**ARTICLE II - Address:**

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

7598 Playa Rienta Way  
Delray Beach, FL 33446

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

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

Louis Sherwood  
Name  
7598 Playa Rienta Way  
Florida street address (P.O. Box NOT acceptable)  
Delray Beach, FL 33446  
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..*

*Louis Sherwood*

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 therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Ronald H. Drucker  
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.)

Ronald H. Drucker  
Typed or printed name of signee

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**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)