

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LO2000003604

Advance Healthcare Systems, LLC

400004927274--9
-02/14/02--01070--010
****125.00 ****125.00

RECEIVED

02 FEB 14 PM 1:09

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Signature _____

Requested by: [Signature]

Name _____

Date 2/14/02

Time 12:31

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____

____ LTD Partnership File _____

____ Foreign Corp. File _____

☒ L.C. File _____

____ Fictitious Name File _____

____ Trade/Service Mark _____

____ Merger File _____

____ Art. of Amend. File _____

____ RA Resignation _____

____ Dissolution / Withdrawal _____

____ Annual Report / Reinstatement _____

____ Cert. Copy _____

☒ Photo Copy _____

____ Certificate of Good Standing _____

____ Certificate of Status _____

____ Certificate of Fictitious Name _____

____ Corp Record Search _____

____ Officer Search _____

____ Fictitious Search _____

____ Fictitious Owner Search _____

____ Vehicle Search _____

____ Driving Record _____

____ UCC 1 or 3 File _____

____ UCC 11 Search _____

____ UCC 11 Retrieval _____

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
02 FEB 14 PM 3:25

2-14-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is Advance Healthcare Systems, LLC.

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is 1455 NW 14th St., Miami, Florida 33125.

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

The name and the Florida Street Address of the Registered Agent are:

Benjamin R. Metsch
1455 NW 14th St.
Miami, Florida 33125

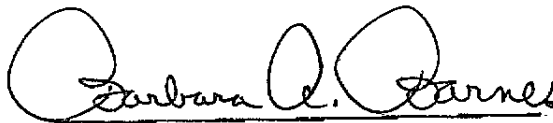
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.



Registered Agent's Signature

ARTICLE IV - Management:

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



Signature of a Member
Barbara A. Barnes

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STATE
SECRETARY
OF
FLORIDA

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