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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
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DIVISION OF CORPORATION

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LIMITED LIABILITY COMPANY

ATLANTIC REHAB CONSULTANTS, LLC

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| Certificate of Status | 0 |
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| Estimated Charge | \$155.00 |

**ARTICLES OF ORGANIZATION
OF
ATLANTIC REHAB CONSULTANTS, LLC**

The undersigned, a Sole Member, hereby makes, acknowledges and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE I
NAME**

The name of this Limited Liability Company is:

ATLANTIC REHAB CONSULTANTS, LLC

**ARTICLE II
ADDRESS**

The mailing address and the principal office address is:

1105 Green Pine Boulevard
Unit A-1
West Palm Beach, Florida 33409

**ARTICLE III
DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV
MANAGEMENT**

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its sole Member and is, therefore, a member-managed company.

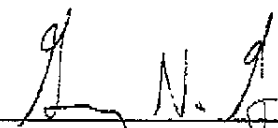
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TALLAHASSEE, FLORIDA
02 MAR 18

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ARTICLE V**ADMISSION OF ADDITIONAL MEMBERS**

The Member shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned, a Sole Member, has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid this 18th day of March, 2002.



Gary N. Gerson, an Authorized Representative of
the Member

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

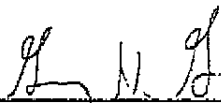
1. The name of the Limited Liability Company is:

ATLANTIC REHAB CONSULTANTS, LLC

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

Gary N. Gerson
c/o Nason, Yeager, Gerson, White & Lioce
1645 Palm Beach Lakes Boulevard, Suite 1200
West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.



Gary N. Gerson, Registered Agent

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