

L02000021197

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H02000182825 8))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH,
Account Number : 075077001702
Phone : (407) 841-1200
Fax Number : (407) 423-1831

FILED
02 AUG 19 PM 3:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
02 AUG 19 AM 10:42
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

St. Vincent's Theracare III, LLC

BK

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

SRL 22982/38846

Electronic Filing Menu

Corporate Filing

Public Access Help

H02000182825 8

ARTICLES OF ORGANIZATION
OF
ST. VINCENT'S THERACARE III, LLC

02 AUG 19 PM 3:43
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I
Name

The name of the limited liability company is St. Vincent's Theracare III, LLC.

ARTICLE II
Address

The mailing address and street address of the principal office of the limited liability company is:

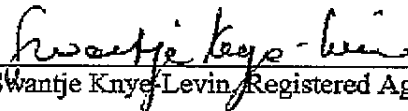
921 North Main Street
Kissimmee, Florida 34744

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

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

Swantje Knye-Levin
921 North Main Street
Kissimmee, Florida 34744

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.


Swantje Knye-Levin, Registered Agent

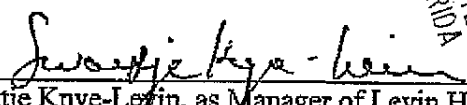
H02000182825 8

ARTICLE IV
Management

The limited liability company is to be managed by one (1) or more managers and is, therefore, a manager-managed company. The initial manager of the limited liability company will be Swantje Knye-Levin.

Dated this 19th day of August, 2002.

FILED
AUG 19 PM 3:43
TALLAHASSEE, FLORIDA
CLERK OF STATE



Swantje Knye-Levin, as Manager of Levin Health Services, LLC, the Sole 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.)