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FLORIDA HEALTH SOURCE, LLC

June 12, 2002

Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

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*****125.00 *****125.00

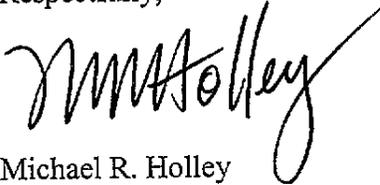
Reference: New Business Registration and Articles of Organization
FLORIDA HEALTH SOURCE, LLC

To Whom It May Concern:

Enclosed, please find the original "Articles of Organization" for FLORIDA HEALTH SOURCE, LLC along with payment of \$125.00 for the filing fee and designation of registered agent.

If you need additional information or have any questions, please feel free to call the office at 407-260-8370.

Respectfully,



Michael R. Holley
VP-CFO
Florida Health Source, LLC

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FLORIDA HEALTH SOURCE, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE I
NAME**

The name of the Limited Liability Company is: **FLORIDA HEALTH SOURCE, LLC**

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: **710 Miami Springs Drive, Longwood, Florida 32779.**

**ARTICLE III
REGISTERED AGENT**

The name and Florida street address of the registered agent are: **MICHAEL GRUBBE, 710 Miami Springs Drive, Longwood, Florida 32779.**

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 proved for in Chapter 608, F.S.



Agent and Authorized Signatory

**ARTICLE IV
MANAGEMENT (Check box if applicable.)**

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

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TALLAHASSEE, FLORIDA



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.)

MICHAEL GRUBBE

Typed or Printed name of signee

019.104512.1

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TALLAHASSEE, FLORIDA