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ROBERT J. BERTRAND ATTORNEY AT LAW

September 17, 2002

863/284-2213

e-MAIL ADDRESS RBertrand@grayharris.com

# **VIA FEDERAL EXPRESS**

Division of Corporations Florida Secretary of State 409 East Gaines Street Tallahassee, Florida 32314 -02-24694

Re: Starbridge Healthcare Group LLC, a Florida Limited Liability Company

Ladies and Gentlemen:

Enclosed please find the original and duplicate of the following documents for the formation of the above named Florida Limited Liability Company:

- 1. The duly executed Articles Of Organization of **Starbridge Health Group LLC**; and
- 2. A duly executed Certificate Of Designation Of Registered Agent/Registered Office.

After examination, please file the original of the enclosed Articles Of Organization and then furnish to the undersigned a Certificate of Organization with respect to the above named Limited Liability Company.

Next, enclosed please find this Firm's check in the amount of \$155.00 to cover the filing fee for the Articles Of Organization in the amount of \$100.00, the filing fee for the Certificate of Designation of Registered Agent/Registered Office in the amount of \$25.00 and the fee for furnishing a certified copy in the amount of \$30.00

If there are any questions concerning any of the foregoing, it would be greatly appreciated if you would telephone the undersigned collect at 863/284-2213.

Thanking you for your usual cooperation, I am

Robert J. Bertrand

RJB/mcd Enclosures

xc: Ronald C. Atkinson, C.P.A.

SIGN OF COOK ONE LORD

## ARTICLES OF ORGANIZATION

**OF** 

# STARBRIDGE HEALTHCARE GROUP LLC

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

#### ARTICLE I

## **NAME**

The name of the Limited Liability Company is STARBRIDGE HEALTHCARE GROUP LLC.

# <u>ARTICLE II</u>

# PRINCIPAL OFFICE

The mailing address of the Limited Liability Company is 331 South Florida Avenue, Suite 400, Lakeland, Florida 33801-4626 and the street address of the principal office of the Limited Liability Company is 331 South Florida Avenue, Suite 400, Lakeland, Florida 33801-4626.

#### ART<u>ICLE III</u>

#### DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

#### ARTICLE IV

#### **PURPOSE**

The Limited Liability Company is organized for the purpose of transacting any and

all lawful business.

# ARTICLE V

# **MANAGEMENT**

The Limited Liability Company is to be a manager-managed company. The name and address of the initial manager is: Ronald C. Atkinson, 331 South Florida Avenue, Suite 400, Lakeland, Florida 33801-4626.

# **ARTICLE V**

## INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is 331 South Florida Avenue, Suite 400, Lakeland, Florida 33801-4626 and the name of the initial registered agent of the Limited Liability Company at that office is Ronald C. Atkinson.

# ARTICLE VI

#### INDEMNIFICATION

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity with was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member has executed these Articles of Organization this  $\frac{12^{10}}{100}$  day of September, 2002.

RONALD C. ATKINSON, Member

# STATE OF FLORIDA COUNTY OF POLK

| The foregoing instrument was        | acknowledged      | before    | me    | this  | Inth     | day   | of |
|-------------------------------------|-------------------|-----------|-------|-------|----------|-------|----|
| September, 2002, by RONALD C. ATKIN | NSON (Y) who is p | personali | у кпо | wn to | o me o   | r()w  | по |
| has produced                        |                   |           | a     | s ide | ntificat | ion a | nd |
| who did not take an oath.           | •                 |           |       |       |          |       |    |

(Affix Notice Contains Seal
Notary Public, State of Florida
My comm. expires June 26, 2006
Comm. No. DD123140

Print Name: H. Margaret Dasinger NOTARY PUBLIC, State of Florida My commission expires: Yune 26, 2006

SECRETARY OF STATE DIVISION OF CORPORATIONS

## CERTIFICATE OF DESIGNATION

OF

# REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND SECTION 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

- The name of the Limited Liability Company is: STARBRIDGE HEALTHCARE
   GROUP LLC.
- 2. The name and street address of its initial registered agent and initial registered office are:

RONALD C. ATKINSON 331 South Florida Avenue, Suite 400 Lakeland, Florida 33801-4626.

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.

RONALD C. ATKINSON

Date: 9/17/02