Redestes Nat 1000 25552 Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1. (Corporation Name)	(Document #)	9000080835391
2. (Corporation Name)	(Document #)	-09/27/0201074006 ****465.60 ****155.00
3. (Corporation Name)	(Document #)	<u>.</u> .
4(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up time		Certified Copy
☐ Mail out ☐ Will wait	Photocopy	☐ Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION	OUALIFICATION TO THE PROPERTY OF THE PROPERTY
Annual Report Fictitious Name	Foreign Limited Partne Reinstatement Trademark Other	

Examiner's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION OF VOX² HEALTHCARE, L.C.

ARTICLE I

RESERVED TO THE PARTY OF THE PA

The name of the limited liability company is VOX² HEALTHCARE, L.C.

ARTICLE II

The period of the limited liability company's duration shall be thirty (30) years from the date of the filing of these Articles of Organization with the Department of State.

ARTICLE III

The purpose for which this limited liability company is organized is to engage in any activity or business permitted under the laws of the United States of Florida.

ARTICLE IV

The address of this limited liability company in the state of Florida is 5255 North Federal Highway, Boca Raton, Florida 33487.

The address of the principal office of this limited liability company in the state of Florida is 5255 North Federal Highway, Boca Raton, Florida 33487.

The name and address of the initial registered agent is Jonathan Bloom, Esq. of Bloom, Ballen & Freeling, Attorneys At Law at 299 Camino Gardens Boulevard, Suite 207, Boca Raton, Florida 33432.

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 V

The percentage of ownership is as follows:

<u>Member</u>

Vox Squared Holding, L.C.

Pro-Rata Share

100.00%

ARTICLE VI

There may be additional contributions to be made by the members.

ARTICLE VII

The members shall maintain the right to admit additional members.

ARTICLE VIII

On the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event, which terminates the continued membership of a member in the limited liability company, the remaining members may continue the business of the limited liability company provided that the unanimous consent of the remaining members is secured.

ARTICLE IX

The management of the limited liability company is reserved to the initial members. The names and addresses of the members are:

Name

Address

Vox Squared Holding, L.C.

5255 North Federal Highway, Boca Raton, Florida 33487

ARTICLE X

Notwithstanding any other provision of these Articles or the Operating Agreement and for federal income tax purposes, a member's share of income, gain, loss, deduction, or credit shall be determined in accordance with the Company property/liabilities guaranteed or funded by one or more Members therefore allowing for the allocation to the Member or Members that bear the economic risk of loss of such property/debt.

Jonathan Bloom, Esq.

Bloom, Ballen & Freeling

Attorneys At Law

Attorney for and Authorized Agent of the Members of Nob Hill Industrial Park, L.C. 299 Camino Gardens Blvd., Suite 207 Boca Raton, FL 33432 (561) 864-0000

Fla. Bar No. 75231

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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: VOX² HEALTHCARE, L.C.
- 2. The name and address of the registered agent and office is:

Jonathan Bloom, Esq.

Bloom, Ballen & Freeling, Attorneys At Law
(Name)

299 Camino Gardens Boulevard, Suite 207 (P.O. Box not acceptable)

Boca Raton, Florida 33432 (City/State/Zip)

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.