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Division of Corporations

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Florida Department of State

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To:

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Fax Number : (850) 205-0383

From:

Account Name : WINDERWEEDLE, HAINES, WARD & WOODMAN, P.A.

Account Number : 076077002775

Phone : (407) 246-8692

Fax Number : (407) 423-7014

LIMITED LIABILITY COMPANY

Central Florida Health Services, LLC

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Page Count	02
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION
FOR
CENTRAL FLORIDA HEALTH SERVICES, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned (the "Member") acting as the organizer and as the initial Member of CENTRAL FLORIDA HEALTH SERVICES, LLC, under the Florida Limited Liability Company Act, Chapter 608, Fla. Stat., adopts the following Articles of Organization:

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**ARTICLE I
NAME**

The name of the limited liability company is:

CENTRAL FLORIDA HEALTH SERVICES, LLC

**ARTICLE II
INITIAL REGISTERED AGENT, REGISTERED OFFICE ADDRESS**

The street address and mailing address of the initial corporate office and initial registered office of this Company is 250 Park Avenue South, 5th Floor, Winter Park, Florida 32789 and the name of the initial registered agent of this Company at that address is Mont Jay Cartwright.

**ARTICLE III
DURATION**

The Company's existence shall commence on December 11, 2002 and it shall exist perpetually thereafter unless dissolved according to law or the Company's Operating Agreement.

**ARTICLE IV
MANAGEMENT**

The Company shall be managed by the Members of the Company as provided in the Company's Operating Agreement.

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IN WITNESS WHEREOF, the undersigned Member has executed these Articles of Organization as of the 11 day of December, 2002.


Mont Jay Cartwright

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 in Chapter 608, Fla. Stat.


Mont Jay Cartwright

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