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DIVISION OF CORPORATION

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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
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LIMITED LIABILITY COMPANY

PAVILION FOR WOMENS CARE, LLC

DIVISION OF CORPORATION

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Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF ORGANIZATION

OF

PAVILION FOR WOMENS CARE, LLC
(a Florida Limited Liability Company)

ARTICLE I - Name:

The name of the Limited Liability Company is: PAVILION FOR WOMENS CARE, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

12515 Kendall Drive
Suite 228
Miami, Florida 33186

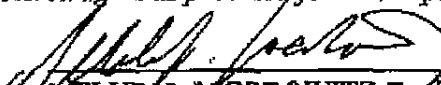
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

MELVIN J. JACOBOWITZ
11900 Biscayne Blvd., Suite 720
Miami, FL 33445

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STATE OF FLORIDA
TALLAHASSEE

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..


MELVIN J. JACOBOWITZ, Registered Agent

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ARTICLE IV - Management:

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

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.


MELVIN J. JACOBOWITZ, as an authorized
representative

Fox/Doc/Pavilion for womens care, llc

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