

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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VISION OF CORPORATIO

LIMITED LIABILITY COMPANY

ALTMEDS, LLC

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF ALTMEDS, LLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

Article 1. Name

The name of the Limited Liability Company is ALTMEDS, LLC.

Article 2. Purpose

The Limited Liability Company is organized to engage in any business permitted by the Florida Statutes, including, but not limited to the business of the development of products for distribution and sale, the ownership, operation and management of real property and for all other lawful activities including, but not limited to, those activities as are reasonably necessary or incidental to the conduct set forth above.

Article 3. Address

The mailing address and street address of the principal office of the Limited Liability Company is: Altmeds, LLC, c/o Donald B. Medalle, 1401 E. Broward Boulevard, Suite 206, Fort Lauderdale, FL 33301-2116.

Article 4. Registered Agent

The name of the Registered Agent for Altmeds, LLC is Donald B. Medalie, 1401 E. Broward Boulevard, Suite 206, Fort Lauderdale, FL 33301-2116.

Article 5. Duration

The period of duration for the Limited Liability Company shall bo: Perpetual.

Article 6. Management

The Limited Liability Company is to be managed by the Members and the names and addresses of the Members are:

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Douald M. Medaur, Esquing + Keil Ev, Hersam I Swith 1401 E. Groward Blud, Victoria Park Centre, Buite 206, Ft. Lauderdale, Fl. 133ch Telephone (354) 453/1008 - Facsbelle (354) 522-2038

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Donald B. Medalie, 1401 E. Broward Boulevard, Suite 205 EEELARY OF STATE Lauderdale, FL 33301-2118.

Article 7. Admission of Additional Members

The Members shall have the right to admit new members by unanimous consent.

Article 8. Members' Rights to Continue Business

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 shall have the right to continue the business on the unanimous consent of the remaining Members.

IN WITNESS WHEREOF, the undersigned have signed these Articles of Organization and acknowledged them to be their act this Laday of February, 2003.

ONALD B. MEDALIE

STATE OF FLORIDA COUNTY OF BROWARD

Pursuant to the provisions of Sections 608.415 and 608.407(1)(d) of the Florida Limited Liability Company Act, the Limited Liability Company identified below submits the following statement in designating its registered office and registered agent in the State of Florida:

The name of the Limited Hability Company is ALTMEDS, LLC.

The name of the Registered Agent for ALTMEDS, LLC is Donald B. Medalie, 1401 E. Broward Boulevard, Suite 206, Fort Lauderdale, FL 33301-2116.

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This statement is intended to acknowledge that, as indiquipadabage, FLORIDA ALTMEDS, LLC has appointed me, Donald B. Medalie, as its Registered Agent to accept service of process for the Company at the place designated above in this certificate. I accept this 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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Dated February 12, 2003.

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