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ACCOUNT NO. : 072100000032

REFERENCE : 938166 4336650

AUTHORIZATION

COST LIMIT : \$ 155.00

*Patricia Knight*

ORDER DATE : February 20, 2003

ORDER TIME : 3:46 PM

ORDER NO. : 938166-005

CUSTOMER NO: 4336650

CUSTOMER: Michelle Smith, Corp Paralegal  
Baker & Mckenzie

Floor 19th  
1200 Brickell Avenue  
Miami, FL 33131

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TALLAHASSEE, FLORIDA

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NAME: OCCUMED, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore EXT. 1147

EXAMINER'S INITIALS:

**ARTICLES OF ORGANIZATION  
OF  
OCCUMED, LLC  
(a Florida limited liability Company)**

**ARTICLE I: NAME**

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

**ARTICLE II: ADDRESS**

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

7910 Northwest 25<sup>th</sup> Street  
Suite 100  
Miami, Florida 33122

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE  
AND REGISTERED AGENT'S SIGNATURE**

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

Corporation Service Company  
1201 Hays Street  
Tallahassee, Florida 32301

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*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 obligation of my position as registered agent as provided for in Chapter 608, F.S.*

Corporation Service Company

By: 

**Brian Courtney  
Asst. V. Pres**

By: 

Name: Manuel E. Iglesias  
Title: Authorized Representative