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Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : HUNTON & WILLIAMS

Account Number : 120000000236 Phone : (305)810-2542 Fax Number : (305)810-2460

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LIMITED LIABILITY COMPANY

Doctorcare Holding, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION

DOCTORCARE HOLDING, LLC

These Articles of Organization are made for the purpose of organizing a Florida limited liability company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

ARTICLE I - NAME

The name of the limited liability company is DOCTORCARE HOLDING, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 1330 S Coral Way, Suite 200, Miami Florida 33145.

ARTICLE III - PURPOSES

The Company is organized for the purpose of transacting all lawful activities and businesses.

ARTICLE IV REGISTERED AGENT; REGISTERED ADDRESS

The name of the initial registered agent of the Company is Maria T. Currier. The Florida street address of the initial registered agent of the Company is c/o Hunton & Williams, 1111 Brickell Avenue, Suite 2500, Miami, Florida 33131.

ARTICLE V MANAGEMENT

The Company shall be a manager-managed company.

ARTICLE VI MISCELLANEOUS

The existence of the Company shall commence on the date of filing these Articles of Organization with the Florida Department of State.

IN WITNESS WHEREOF, the undersigned authorized representative of DoctorCare Holding, LLC has executed these Articles of Organization as of March ______, 2003.

Maria T. Currier, as Authorized

Representative of Company

CERTIFICATE DESIGNATING THE ADDRESS AND AN AGENT UPON WHOM PROCESS MAY BE SERVED

WITNESSETH:

That DOCTORCARE HOLDING, LLC, desiring to organize under the laws of the State of Florida, has named Maria T. Currier, located at c/o Hunton & Williams, 1111 Brickell Avenue, Suite 2500, Florida 33131, as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above-stated company at the place designated in this certificate. I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of myoduties, and I am familiar with, and accept the duties and obligations of a registered agents outlined in Section 608.415, Florida Statutes.

Mario T. Currior, Bocustored Agost