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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY**A-UNIQUE KIDNEY CENTER, LLC****AL**

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE I - Name:**The name of the Limited Liability Company is: **A-UNIQUE KIDNEY CENTER, LLC.****ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: 10726 Charleston Place, Cooper City, Florida 33026.

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

The name and the Florida street address of the registered agent are: Manjit S. Gulati, 10726 Charleston Place, Cooper City, Florida 33026.

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.



 Manjit S. Gulati
 Registered Agent's Signature



 Manjit S. Gulati
 Signature of a member or an authorized representative of a member

(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.

Manjit S. Gulati
 Typed or printed name of signee

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