

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L03000018624  
FILED 8:00 AM  
May 23, 2003  
Sec. Of State**

**Article I**

The name of the Limited Liability Company is:

WHEEL IN & WHEEL OUT, MEDICAL SUPPLIES, LLC

**Article II**

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

P.O. BOX 340494  
TAMPA, FL. US 33694

The mailing address of the Limited Liability Company is:

P.O. BOX 340494  
TAMPA, FL. US 33694

**Article III**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

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

GWENDOLYN E HODGE  
10025 CEDAR DUNE DRIVE  
TAMPA, FL. 33624

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.

Registered Agent Signature: GWENDOLYN E. HODGE

## **Article V**

The name and address of managing members/managers are:

Title: CEO  
GWENDOLYN E HODGE  
10025 CEDAR DUNE DRIVE  
TAMPA, FL. 33624

Title: CO  
WILLARD N CRAWFORD  
5312 BONNIE BRAE CIRCLE  
ORLANDO, FL. 32808

Signature of member or an authorized representative of a member

Signature: GWENDOLYN E. HODGE

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