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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (305) 674-3313
Fax Number : (305) 674-3359

LIMITED LIABILITY COMPANY

Prestige Healthcare Resources, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR A FLORIDA
LIMITED LIABILITY COMPANY**
In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:
Prestige Healthcare Resources, LLC

ARTICLE II: Address

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

5455 North Federal Highway Suite I-5
Boca Raton, Florida 33487

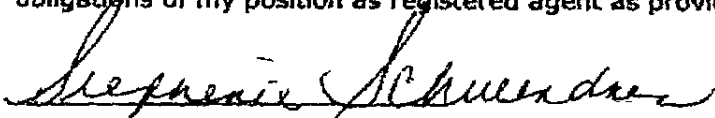
ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

Stephenie Schwendner

5455 North Federal Highway Suite I-5
Boca Raton, Florida 33487

Having been named as registered agent 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.



Stephenie Schwendner/ Registered Agent's Signature

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by members and is, therefore, Member Managed Company.

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ARTICLE V: MEMBERS (optional)

MEMBER:

Stephenie Schwendner
3440 Dunes Vista Drive
Pompano Beach, Florida 33069

MEMBER:

Cheri Ouellette
7625 Forest Green Lane
Boynton Beach, Florida 33436

MEMBER:

Ruth Ann Kalish
1228 Hillsboro Mile (#102)
Hillsboro Beach, Florida 33062

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Cheri Ouellette

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.)

Stephenie Schwendner

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