

07-29-03

07-29-03 19:19 AKERMAN, SENTERFITT 04-354-4459 226 04-354-4459 04-354-4459

603000027892

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H03000243261 2)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : AKERMAN, SENTERFITT OF JACKSONVILLE
Account Number : 105543000740
Phone : (904) 798-3700
Fax Number : (904) 354-4459

RECEIVED
03 JUL 30 AM 8:03
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Jax Med Management, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

603-27892
OK

H03000243261

ARTICLES OF ORGANIZATION**OF****JAX MED MANAGEMENT, LLC**

Pursuant to the Florida Limited Liability Company Act, Chap. 608, Florida Statutes, as amended from time to time (the "Act"), the following are adopted as the Articles of Organization of the limited liability company organized hereby:

**ARTICLE I
NAME**

The name of the limited liability company (the "Company") shall be Jax Med Management, LLC.

**ARTICLE II
ADDRESS**

The mailing address and the street address of the principal office of the Company shall be 1219 Lake Asbury Drive, Green Cove Springs, Florida 32043.

**ARTICLE III
REGISTERED AGENT**

The initial registered office of the Company shall be 50 North Laura Street, Suite 2500, Jacksonville, Florida 32202 and its initial registered agent at such office shall be MOTOLAW, Inc.

**ARTICLE IV
ADDITIONAL MEMBERS**

Additional members (as the term "member" is defined in § 608.402 (21) of the Act) may be admitted at such times and on such terms and conditions as provided in the Operating Agreement.

**ARTICLE V
MANAGEMENT OF THE COMPANY**

This Company will be a manager-managed company managed in accordance with and subject to the requirements of the Act and the Operating Agreement of the Company.

H03000243261

H03000243261

IN WITNESS WHEREOF, the undersigned, being a member or an authorized representative of a member of the Company, has executed these Articles of Organization on behalf of the Company in accordance with §608.407(4) of the Act.

Dated this 29th day of July, 2003.


Zanda Chandler, Manager

03 JUL 30 11 54 13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H03000243261

H03000243261

**CERTIFICATE DESIGNATING REGISTERED OFFICE AND REGISTERED
AGENT FOR THE SERVICE OF PROCESS WITHIN FLORIDA**

In compliance with Chapter 608, Florida Statutes, as amended from time to time (the "Act"), the following is submitted:

Jax Med Management, LLC, desiring to organize or qualify under the laws of the State of Florida as a limited liability company pursuant to the Act, hereby designates MOTOLAW, Inc. as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 50 North Laura Street, Suite 2500, Jacksonville, FL 32202.

DATED this 29th day of July, 2003.


Zanda Chandler, Manager

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 agree to 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.

DATED this 29th day of July, 2003.

MOTOLAW, Inc.

By: 
Robert G. Shaffer, II, President

H03000243261