

12/09/03

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FARR LAW FIRM

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Florida Department of State  
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**LIMITED LIABILITY COMPANY**  
**PRIMARY CARE PROPERTIES, LLC**

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**12-10-03**

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I — Name:

The name of the Limited Liability Company is:

PRIMARY CARE PROPERTIES, LLC

ARTICLE II — Address:

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

PRIMARY CARE PROPERTIES, LLC  
2091 Tamiami Trail  
Port Charlotte, FL 33948

Mailing Address:

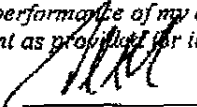
c/o David A. Holmes, Esquire  
Farr, Farr, Emerich, Sifrit, Hackett & Carr, P.A.  
Post Office Drawer 511447  
Punta Gorda, Florida 33951-1447

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

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

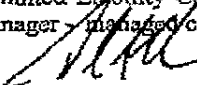
David A. Holmes, Esquire  
Farr, Farr, Emerich, Sifrit,  
Hackett and Carr, P.A.  
99 Nesbit Street  
Punta Gorda, Florida 33950-3636

*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.*

  
\_\_\_\_\_  
David A. Holmes, Registered Agent

ARTICLE IV — Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

  
\_\_\_\_\_  
David A. Holmes, Authorized Representative of a member

David A. Holmes  
\_\_\_\_\_  
Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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