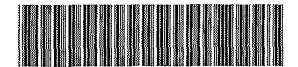
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### LEFTER, WILKINSON & SADORF, L.L.C.

RICK W. SADORF G. BARRY WILKINSON ATTORNEYS AND COUNSELORS AT LAW
696 First Avenue North, Suite 201
St. Petersburg, Florida 33701-3649
Telephone (727) 823-1514
FAX (727) 823-0328
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Baird@lefter.com
Ebarryw@tampabay.rr.com
rwsadorf@tarpopbay.rr.com

OF COUNSEL THOMAS R. CUSHMAN ALICE L. CUSHMAN J. BAIRD LEFTER

February 13, 2004

Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399 Re:

NEUROFLEX SOLUTIONS, L.L.C.

#### Gentlemen:

Enclosed herewith please find duplicate original Articles of Organization for NEUROFLEX SOLUTIONS, L.L.C. together with our firm's check, number 14153, in the amount of \$155.00 representing the following:

Filing Fee & Registered \$125.00
Agent Designation
Certified Copy 30,00

Total \$155.00

Please file these Articles immediately upon receipt and return a certified copy to our office in the pre-addressed, stamped envelope provided.

If you have any questions or if you need any additional information, please do not hesitate to contact me.

Very truly yours

G. Barry Wilkinson

GBW:alk Enclosures

cc: Harold W. Covert
G.\FILES\N\Neuroflex LLC\SecState.ltr.wpd

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## ARTICLES OF ORGANIZATION OF NEUROFLEX SOLUTIONS, L.L.C.

The undersigned, desiring to form a limited liability company under the provisions of Sections 608.401 et seq., Florida Limited Liability Company Act, as amended, hereby sets forth the following:

Article I. Name. The name of the Limited Liability Company is NEUROFLEX SOLUTIONS, L.L.C.

Article II. <u>Principal Office</u>. The mailing address and the street address of the principal office of the Limited Liability Company is 6545 - 44th Street North, Suite 4007, St. Petersburg, Florida 33781.

Article III. Registered Office and Agent. The post office address of the initial registered office of the Limited Liability Company is located within the City of St. Petersburg at 696 First Avenue North, Suite 201, St. Petersburg, Florida 33701. The initial registered agent is G. Barry Wilkinson, whose business address is the same as the post office address of the initial registered office, and who is a resident of Florida and a member of the Florida State Bar.

Article IV. <u>Management By Managers</u>. The Limited Liability Company shall be managed by one or more Managers, who need not be members, whose identities and terms of office shall be set forth in the written Operating Agreement of the Limited Liability Company.

Article V. Written Operating Agreement. Any operating agreement entered into by the members of the Limited Liability Company, and any amendments or restatements thereof, shall be in writing. No oral agreement among any of the members or managers of the Limited Liability Company shall be deemed or construed to constitute any portion of, or otherwise affect the interpretation of, any written operating agreement of the Limited Liability Company, as amended and in existence from time to time.

Dated: FEBRUARY 13, 2004.

G BARRY WILKINSON

STATE OF FLORIDA COUNTY OF PINELLAS

The foregoing Articles of Organization were acknowledged before me this 13 day of February, 2 lkinson, who is personally known to me or who has produced \_\_\_\_\_\_\_ as identification.

by G. Barry Wilkinson, who is personally known to me or who has produced \_\_\_\_\_

Notary Public, State of Florida

My Commission Expires: 2/6/04

Anita Kuhn
COMMISSION # DDD70548 EXPIRES
February 6, 2006
BONDED THRUTROY FAIN INSURANCE, INC.

#### ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above-named Limited Liability Company at a place designated in these Articles of Organization, I hereby accept to act in this capacity, and agree to comply with the provisions of Chapter 48.091, Florida Statutes, relative to keeping open said office for service of process. I am familiar with and accept the duties of Registered Agent as set forth in Sections 608.401 et seq., Florida Statutes.

DATED this 13 th day of February, 2004

G. BARRY WILKINSON, ESQUIRE