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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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DIVISION OF CORPORATIONS ; ALLAHASSEE, FLORIDA

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LAW OFFICES

PERTNOY, SOLOWSKY & ALLEN, P.A.

RICHARD L. ALLEN LEAH GARDNER* ALFRED I. HOPKINS HENRY E. MARINELLO CHRISTINE NESTOR SIDNEY M. PERTNOY JAY H. SOLOWSKY MUSEUM TOWER • SUITE 2000 150 WEST FLAGLER STREET MIAMI, FLORIDA 33130 http://www.psahlaw.com

TELEPHONE (305) 371-2223 BROWARD (954)522-5688 FAX (305) 373-2073 EMAIL: rallen@psahlaw.com

* Also admitted to practice in New York

February 18, 2004

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

> Re: Lasolas Spas, LLC Our File No. 3089.006



Gentlemen:

Enclosed please find the original and one copy of the Articles of Organization for Florida Limited Liability Company for the above-referenced limited liability company. Also, enclosed is our check in the amount of \$125.00 representing the following:

Filing Fee	\$100.00
Designation of Registered Agent	25.00
TOTAL	\$125.00

Please return a stamped copy of the Articles to the undersigned in the enclosed self-addressed stamped envelope. Thank you for your cooperation.

RICHARD L. ALLEN

Very taply yours

RLA/ml Enclosures

cc: Barry M. Concool, M.D.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	Æ I –	Name:
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The name of the Limited Liability Company is:

LASOLAS SPAS, LLC	 -		
	 <u> </u>	 <u> </u>	· · · · · ·
ADTICLE II Address			

The mailing address and street address of	f the principal office of th	e Limited Liability Company is:
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Principal Office Address:	Mailing Address:
Museum Tower - Suite 2000	SAME
150 West Flagler Street	
Miami, Florida 33130	<u> </u>

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

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

Richard L. Allen, Esc	۹.
	Name
Museum Tower - Su	ite 2000, 150 West Flagler Street
Florida street a	ddress (P.O. Box NOT acceptable)
Miami	FLORIDA 33130
C	ity, State, and Zip

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member

ember is as follows:	711.35
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NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE

(Use attachment if necessary)

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.)

Richard L. Allen

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)