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REFERENCE :

820316

7145323

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: July 26, 2004

ORDER TIME : 10:26 AM

ORDER NO. : 820316-005

CUSTOMER NO: 7145323

CUSTOMER: Mr. Wade Boyette

Grayrobinson, P.a.

P.o. Box 120848

Clermont, FL 34712-0848

# DOMESTIC FILING

NAME:

BROOKSVILLE REGIONAL MEDICAL

PLAZA, L.L.C.

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

OF MILES PARSON

# ARTICLES OF ORGANIZATION

of

# of Mr. See By 2:38 BROOKSVILLE REGIONAL MEDICAL PLAZA, L.L.C.

The undersigned hereby certifies that he has associated himself with other members for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges and immunities of limited liability companies for profit and hereby adopt the following Articles of Organization for such limited liability company:

#### ARTICLE I

#### NAME AND PRINCIPAL OFFICE

The name of this limited liability company is BROOKSVILLE REGIONAL MEDICAL PLAZA, L.L.C., and its principal office and mailing address is located at 548 S. HIGHWAY 27, SUTTE C, CLERMONT, FL, 34711.

#### ARTICLE II

#### DURATION

The existence of this limited liability company shall be perpetual, commencing on the date of filing with the Secretary of State's office.

#### ARTICLE II

#### PURPOSE

The purpose of this limited liability company is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE III

#### **MEMBERSHIP**

The members of this limited liability company have the right to admit additional members to this organization upon the unanimous consent of those individuals or entities who are members prior to the admission of the new member. However, the transferee or assignee shall not be entitled to become a member or participate in the business and affairs of this limited company unless the transfer or assignment is approved by the unanimous consent of the members not proposing to transfer or assign # 4232 v1

their interests.

# ARTICLE IV

#### DISSOLUTION

The limited liability company will dissolve as provided in the Operating Agreement executed by and among the members.

#### ARTICLE V

#### MANAGEMENT

This organization is to be managed by a manager or managers elected by a majority vote of its members. The initial managers, who shall serve until the earlier of their death, resignation, replacement or until the first annual meeting of members and his successors are elected and qualified, shall be:

#### DANIEL J. HESSBURG

# ARTICLE VI

#### INITIAL REGISTERED OFFICE AND AGENT

The street address of this limited liability company's initial registered office is 548 S. HIGHWAY 27, SUITE C, CLERMONT, FL 34711, and the name of this limited liability company's initial registered agent is DANIEL J. HESSBURG.

The undersigned, being one of the members of the limited liability company, hereby certifies that the foregoing constitutes the Articles of Organization of BROOKSVILLE REGIONAL MEDICAL PLAZA, L.L.C..

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization for this limited liability company this 22 day of \_\_\_\_\_\_, 2004.

DANIEL J. HESSBURG

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#### ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

I, DANIEL J. HESSBURG, am familiar with and hereby accept the appointment as Registered Agent for BROOKSVILLE REGIONAL MEDICAL PLAZA, L.L.C., as set forth in the Articles of Organization filed simultaneously herewith.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal this 22 day of , 2004.

DANIEL. WHESSBURE