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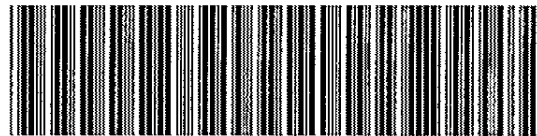
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LEGISLATIVE
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ARTICLES OF ORGANIZATION FOR
ARRAY HEALTHCARE FACILITIES SOLUTIONS, LLC,
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of the Limited Liability Company is ARRAY HEALTHCARE FACILITIES SOLUTIONS, LLC.

ARTICLE II - ADDRESS:

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

625 North Flagler Drive, 9th Floor
West Palm Beach, Florida 33401

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE:

Francis X. J. Lynch, Esquire
625 North Flagler Drive, 9th Floor
West Palm Beach, Florida 33401

Having been named as registered agent and to accept service of process for the above stated limited liability company of 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.

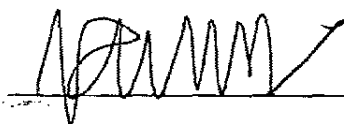


FRANCIS X. J. LYNCH, Registered Agent

ARTICLE IV - MANAGEMENT: (Check if applicable)

The Limited Liability Company is to be manager-managed and JAMES P. KUKLA, a Florida-licensed architect, shall serve as the Managing Member.

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



JAMES P. KUKLA
Typed or printed name of signee

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