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CT CORPORATION

Division of Corporations

P.01

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Florida Department of State
Division of Corporations
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Division of Corporations
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Account Name : C T CORPORATION SYSTEM
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Phone : (850) 222-1092
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LIMITED LIABILITY COMPANY

LMC MOB, LLC

Certificate of Status	0
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Estimated Charge	\$125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/11/2005

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LMC MOB, LLC**ARTICLE II - Address:**

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

Principal Office Address:475 CENTRAL AVENUE, SUITE 305ST. PETERSBURG, FLORIDA 33701**Mailing Address:**475 CENTRAL AVENUE, SUITE 305ST. PETERSBURG, FLORIDA 33701**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

CT Corporation System

Name

1200 South Pine Island RoadFlorida street address (P.O. Box **NOT** acceptable)Plantation, Florida 33324

City, 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, F.S..

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Concepcion Braganza / Special Assistant Secretary
Registered Agent's Signature

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

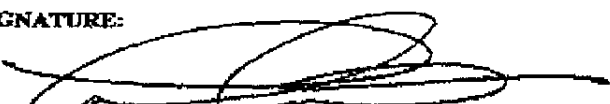
Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRR. PATRICK MARSTON475 CENTRAL AVENUE, SUITE 305ST. PETERSBURG, FLORIDA 33701

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**
Signature of a member or an authorized representative of a member.

(In accordance with section 606.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

R. PATRICK MARSTON

Typed or printed name of signor

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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