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DIVISION OF CORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

everglades physical therapy rehab, llc

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

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EVERGLADES PHYSICAL THERAPY REHAB, LLC

ARTICLES OF ORGANIZATION

The undersigned, being a duly authorized representative of a member, desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, does hereby adopt the following Articles of Organization:

ARTICLE I. NAME

The name of the limited liability company is **EVERGLADES PHYSICAL THERAPY REHAB, LLC** (the "Company").

ARTICLE II. ADDRESS

The principal office and mailing address of the Company is:

9700 S. Dixie Highway, Suite 1030
Miami, Florida 33156

ARTICLE III. DURATION AND CONTINUATION

The period of the Company's duration shall commence with the filing of these Articles of Organization with the Secretary of State, and shall continue perpetually, unless terminated (i) in accordance with the Company's Operating Agreement, or (ii) by the unanimous written agreement of all Members.

ARTICLE IV. PURPOSE

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

Myron M. Samole
Samole & Berger, P.A.
9700 S. Dixie Highway
Suite 1030
Miami, FL 33156
FL Bar No. 323527

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TALLAHASSEE, FLORIDA

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ARTICLE V. REGISTERED AGENT AND OFFICE

The Company designates 9700 South Dixie Highway, Suite 1030, Miami, Florida 33156, as the street address of the initial registered office of the Company and names Myron M. Samole the Company's initial registered agent at that address to accept service of process within this state.

ARTICLE VI. ADDITIONAL MEMBERS

Additional members may be admitted in the manner set forth in the Operating Agreement of the Company, and upon unanimous consent of all present members.

ARTICLE VII. MANAGEMENT

The Company shall be conducted, carried on, and managed by no less than two (2) Managers, who shall be elected annually by the Members of the Company in the manner prescribed by and provided in the Operating Agreement of the Company. Such Manager(s) shall also have the rights and responsibilities described in the Operating Agreement of the Company. The name and address of the initial Manager is as follows:

Arnold Gambong Cardona

9700 S. Dixie Highway, Suite 1030
Miami, Florida 33156


Such Manager shall serve in such capacity until the first annual meeting of the Members or until his successor is duly elected and qualified.

ARTICLE VIII. REGULATIONS

The power to enact, adopt, alter, amend, or repeal the Operating Agreement of the Company shall be vested in the Members of the Company. If a provision of these Articles of Organization differs from a provision of the Company's Operating Agreement, then, to the extent permitted by law, the Operating Agreement will govern.


IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal this 1st day of April 2005.

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TALLAHASSEE, FLORIDA


Myron M. Samole
Duly Authorized Representative of the Members

ACCEPTANCE OF REGISTERED AGENT

The undersigned agrees to act as registered agent for the Company named above to accept service of process at the place designated in these Articles of Organization, and to comply with the provisions of Chapter 608, Florida Statutes, and acknowledge that he is familiar with, and accepts, the obligations of such position.


Myron M. Samole
Dated: April 1, 2005

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TALLAHASSEE, FLORIDA

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STATE OF FLORIDA

COUNTY OF MIAMI-DADE

I, Myron M. Samole, a duly authorized representative of the members of
EVERGLADES PHYSICAL THERAPY REHAB, LLC being first duly sworn, deposes and
says:

1. That I am a duly authorized representative of the member of **EVERGLADES
PHYSICAL THERAPY REHAB, LLC**, a Florida Limited Liability Company
(the "Company");
2. That the Company has one member.

And further Affiant sayeth not.



Myron M. Samole
Duly Authorized Representative of the Members

The foregoing instrument was acknowledged before me this 1st day of April, 2005, by
Myron M. Samole, who is personally known to me and who did take an oath.



Patricia M. Lanners
Notary Public - State of Florida



Patricia M. Lanners
My Commission 00364428
Expires November 20, 2008

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