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#### ARTICLES OF ORGANIZATION

#### FOR

# PARAMOUNT HEALTHCARE, LLC

# A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name"

The name of the Limited Liability Company is:

PARAMOUNT HEALTHCARE, LLC

ARTICLE II - Address:

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

1100 FIFTH AVENUE SOUTH, SUITE 201 NAPLES, FLORIDA, 34102

ARTICLE III - Registered Agent Name and Address:

The name and stree: address of the registered agent of the Limited Liability company is:

SHABRACIII CORP. C/O JEFF ROLQUIN 1100 FIFTH AVENUE SOUTH, SUITE 201 NAPLES, FLORIDA 34102

ARTICLE IV - Duration:

The period of duration for the Limited Liability Company shall be:

This Company shall commence to exist on filing these Articles, in accordance with Section 608.409 (1), Florida Statutes, and shall have perpetual existence.

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ARTICLE V - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and then name(s) and address(es) of such manager(s) who is/ are to serve as manager(s) is/ are:

■ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

SHABRACHI CORP. C/O JEFF ROLQUIN 1100 FIFTH AVENUE SOUTH, SUITE 201 NAPLES, FLORIDA 34102

ARTICLE VI - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members, provided the additional Membershas purchased, or otherwise acquired a membership unit.

casture of a member or authorized representative of a member.

(Infect ordance with section 608,408(3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts herein are true.)

Executed on March 14, 2005 By: J. Lowell Rolquin, Member

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### CONSENT OF REGISTERED AGENT

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

J. Lowell Rolquin keculed on March 14, 2005

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