

Division of Corporations

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Florida Department of State
Division of Corporations
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MJH

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : PAUL S. MARTIN & ASSOCIATES, P.A.
Account Number : I20000000187
Phone : (954) 923-4604
Fax Number : (954) 923-6545

05 JUN -2 PM 2:51

LIMITED LIABILITY COMPANY**T.H. REHAB FUND, LLC**

Certificate of Status	0
Certified Copy	0
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05 JUN -2 AM 8:50

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ARTICLES OF ORGANIZATION
FOR
T.H. REHAB FUND, LLC

ARTICLE I

NAME

The name of the Florida Limited Liability Company is T.H. Rehab Fund, LLC.

ARTICLE II

COMPANY BUSINESS & MAILING ADDRESS

The mailing address and street address of the company is: 2134 Hollywood Boulevard, Hollywood, FL 33020.

ARTICLE III

NUMBER OF UNITS

The company is authorized to issue one thousand (1000) units.

ARTICLE IV

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of the company is 2134 Hollywood Boulevard, Hollywood, FL 33020, and the name of the initial registered agent of the company at that office is Paul S. Martin.

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ARTICLE V

INDEMNIFICATION

The company shall indemnify any authorized representative, officer, or director or any former officer or director to the full extent permitted by law.

ARTICLE VI

COMPANY PURPOSE

The company shall do business in and for any purpose allowed by law.

ARTICLE VII

MANAGEMENT [OFFICERS/DIRECTORS]

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of each initial manager [officer(s) and director(s)] is:

Peter J. Martin, Manager, 2134 Hollywood Boulevard, Hollywood, FL 33020.

Dean Hellekson, Manager, 2134 Hollywood Boulevard, Hollywood, FL 33020.

IN WITNESS WHEREOF, the undersigned member or authorized representative of member has executed these articles of organization this 2d day of June, 2005.

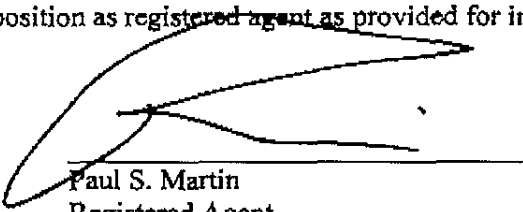

Paul S. Martin, as authorized representative

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ACKNOWLEDGMENT OF REGISTERED AGENT:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated above 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 statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.



Paul S. Martin
Registered Agent

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