

06/24/2005 10:05 FAX (954) 522-9123

BRINKLEY MCNERNEY

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Division of Corporations

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Account Name : BRINKLEY, MCNERNEY & MORGAN  
Account Number : 076077003213  
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M. HODGES

LIMITED LIABILITY COMPANY

HSG Therapy, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION  
OF  
HSG THERAPY, LLC**

The undersigned, intending to form a limited liability company under the Florida Limited Liability Company Act, declares that the following Articles of Organization shall serve as the Charter and authority for the conduct of business of the limited liability company.

**ARTICLE I  
NAME**

This name of the limited liability company shall be HSG Therapy, LLC.

**ARTICLE II  
ADDRESS**

The street address and mailing address of the principal office of this limited liability company shall be:

2000 W. Commercial Boulevard, Suite 202  
Fort Lauderdale, Florida 33309

**ARTICLE III  
EFFECTIVE DATE**

The effective date of the formation of this limited liability company shall be July 1, 2005.

**ARTICLE IV  
DURATION**

The duration of this limited liability company shall be perpetual, unless dissolved in a manner provided by law, or as provided in the Operating Agreement adopted by the members.

**ARTICLE V  
INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

The name of this limited liability company's initial registered agent is David F. Hanley, Esq., and the address of the initial registered office is 200 East Las Olas Boulevard, 19<sup>th</sup> Floor, Fort Lauderdale, Florida 33301.

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**ARTICLE VI  
PURPOSES AND POWERS**

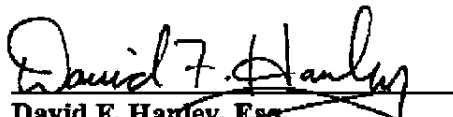
The purpose of this limited liability company is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

**ARTICLE VII  
MANAGEMENT**

The limited liability company is to be managed by its Members.

The undersigned, being an authorized representative of an initial member of this limited liability company, hereby certifies that this instrument constitutes the Articles of Organization of HSG Therapy, LLC.

Executed on this 24th day of June, 2005.

  
David F. Hanley, Esq.  
Authorized Representative of a Member

The foregoing instrument was acknowledged before me this 24th day of June, 2005, by David F. Hanley, Esq., who is personally known to me, and who did not take an oath, and who acknowledged before me that he executed the same as his free and voluntary act for the uses and purposes therein set forth.

  
Notary Public - State of Florida

[Notary Stamp]



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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT AND REGISTERED OFFICE**

STATE OF FLORIDA :  
: SS  
COUNTY OF BROWARD :

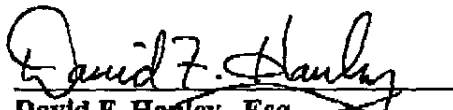
Pursuant to the provisions of Florida Statutes Sections 608.415 and 608.407(1)(d), HSG Therapy, LLC, submits the following statement in designating its registered office and registered agent in the State of Florida:

The name of the limited liability company is HSG Therapy, LLC.

The name of the registered agent for HSG Therapy, LLC is David F. Hanley, Esq., and the street address of the office where the agent is located is 200 East Las Olas Boulevard, 19<sup>th</sup> Floor, Fort Lauderdale, Florida 33301.

This statement is to acknowledge that, as indicated above, HSG Therapy, LLC has appointed me, David F. Hanley, Esq., as its registered agent to accept service of process for the company at the place designated above in this certificate. I accept this 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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

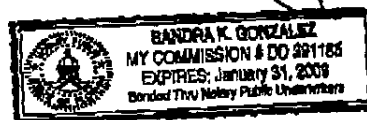
Dated this 24th day of June, 2005.

  
David F. Hanley, Esq.  
Registered Agent

The foregoing instrument was acknowledged before me this 24th day of June, 2005, by David F. Hanley, Esq., who is personally known to me, and who did not take an oath, and who acknowledged before me that he executed the same as his free and voluntary act for the uses and purposes therein set forth.

  
Notary Public - State of Florida

[Notary Stamp]



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