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Divicion of Corporations

Fax Number : (850)205-0383

ET-OUT

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850)385-6735
Fax Number : (954)641-4192

LIMITED LIABILITY COMPANY

SPORTS MEDICINE INTERNATIONAL OF MIAMI, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$125.00 |

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J. BRYNN SEP 3 0 2005

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ARTICLES OF ORGANIZATION OF

SPORTS MEDICINE INTERNATIONAL OF MIAMI, LLC

A Limited Liability Company
Organized under the Laws of the State of Florida

ARTICLE 1 - NAME

The name of the limited liability company is:

SPORTS MEDICINE INTERNATIONAL OF MIAMI, LLC

ARTICLE II - ADDRESS

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

14329 Kendale Lakes Circle Miami, FL 33183

ARTICLE III - REGISTERED AGENT AND OFFICE

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

ELSA GARCIA 1391 East Sandpiper Circle Pembroke Pines, FL 33026

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.

ELSA GARCIA, as Registered Agent

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

GRIZELLE GARCIA, Member

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