

Division of Corporations

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Florida Department of State  
Division of Corporations  
Public Access System

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## To:

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

## From:

Account Name : MORRIS A. LECOMPTE, P.A.  
Account Number : 072100000461  
Phone : (727) 896-1000  
Fax Number : (727) 896-1009

## LIMITED LIABILITY COMPANY

Medcere, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
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ARTICLES OF ORGANIZATION  
OF  
MEDCERE, LLC

The undersigned, acting as the organizer of a limited liability company to be formed under the Florida Limited Liability Company Act, as amended (the "Act"), hereby forms a Florida limited liability company (this "Company") pursuant to the Act and hereby sets forth the following Articles of Organization (these "Articles");

ARTICLE I

Name

The name of this Company shall be MEDCERE, LLC.

ARTICLE II

Place of Business

The street address of the principal office of this Company shall be 4906-A Creekside Drive, Clearwater, FL 33760 and the mailing address of the principal office of this Company shall be 4906-A Creekside Drive, Clearwater, FL 33760 or such other place or places as may be designated by the manager(s) from time to time.

ARTICLE III

Registered Agent and Office

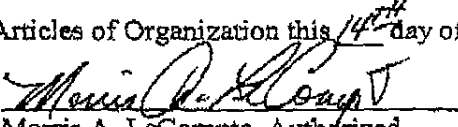
The initial registered agent for this Company shall be Morris A. LeCompte, and the address of the registered agent for service of process shall be 800 Second Avenue South, Suite 380, St. Petersburg, Florida 33701.

ARTICLE IV

Management of Business

The Company shall be a manager-managed company.

The undersigned has executed these Articles of Organization this 14<sup>th</sup> day of October, 2005.

  
Morris A. LeCompte, Authorized  
Representative

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CERTIFICATE OF DESIGNATION  
AND  
ACCEPTANCE BY REGISTERED AGENT

The undersigned, having been named Registered Agent and designated to accept service of process for MEDECERE, LLC, at 800 Second Avenue South, Suite 380, St. Petersburg, Florida 33701, hereby agrees to act in this capacity, and further acknowledges that he is familiar with and agrees to comply with the provisions of all statutes relative to the proper and complete performance of the duties hereunder.

Dated: 10/14/05

  
MORRIS A. LeCOMPTE

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