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### ICARD, MERRILL, CULLIS, TIMM FUREN & GINSBURG, P.A.

ATTORNEYS AND COUNSELORS
2033 MAIN STREET, SUITE 600
SARASOTA, FLORIDA 34237
TELEPHONE (941) 366-8100
FACSIMILE (941) 552-0108

www.icardmerrill.com

ANDRÉ K.R. CHARBONNEAU E-Mail, acharbonneau@cardmerrill.com

REPLY TO: P.O. BOX 4195 SARASOTA, FLORIDA 34230

December 12, 2005

Via Federal Express

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

RE: BOTANY, LLC

Dear Mr. Rivers:

Enclosed herewith are the Articles of Organization to be filed to form the above referenced Florida limited liability company. Please find enclosed Check # 062395 in the amount of \$155.00; representing the filing fee of \$100.00, Registered agent fee of \$25.00, and a fee of \$30.00 for a certified copy of the Articles of Organization.

If you have any questions, please do not hesitate to call me at (941) 366-5707. Thank you for your assistance.

Sincerely,

ICARD, MERRILL, CULLIS, TIMM,

FUREN & GINSBURG, P.A.

André K.R. Charbonneau, Esq.

AKC/ph Enclosure

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# ARTICLES OF ORGANIZATION OF BOTANY, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

### ARTICLE I NAME

The name of the limited liability company shall be BOTANY, LLC ("Company").

### ARTICLE II PURPOSE AND POWER

The purpose for which the Company is organized is to own, operate and manage property, real, personal and mixed, of any kind or nature, and to otherwise conduct any lawful business to promote any lawful purpose, and to engage in any lawful act or activity, for which limited liability companies may be organized under the Florida Limited Liability Company Act, including, but not limited to, the purchase, development, sale, service, lease and management of personal and real properties of all kinds and descriptions.

The Company shall have the powers provided for a limited liability company under the Florida Limited Liability Company Act, and by applicable law. All such powers shall be exercised by or under the authority of, and the business and affairs of this Company shall be managed under the direction of the managers of the Company.

## ARTICLE III MAILING ADDRESS AND PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company, shall, be 846 S. Osprey Avenue, Sarasota, Florida 34236.

## ARTICLE IV INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The name and street address of the initial registered agent of the Company in the State of Florida is:

Andre Charbonneau, Esq. 2033 Main Street, Suite 600 Sarasota, Florida 34237

### ARTICLE V MEMBERS

The Company is to have the following Members, whose name and address are:

John E. Sullivan, Jr., M.D., P.A., Profit Sharing Plan 846 S. Osprey Avenue Sarasota, Florida 34236

### ARTICLE VI MANAGEMENT

The Company is to be a manager-managed company.

### ARTICLE VII MANAGER

The initial manager of the company is to be: John E. Sullivan, Jr., M.D.

### ARTICLE VIII OPERATING AGREEMENT

The Operating Agreement entered into by the members of the Company, and any amendments or restatements thereof, shall be in writing. No oral agreement among any of the members or managers of the Company shall be deemed or construed to constitute any portion of, or otherwise affect the interpretation of, the Operating Agreement of the Company, as amended and in existence from time to time.

IN WITNESS WHEREOF, the undersigned member (or authorized representative) has executed these Articles of Organization at Sarasota, Florida, as of December 12, 2003.

André K.R. Charbonneau as Agent

#### CERTIFICATE 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 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:

Registered Agent Signature: 5

André K. R. Charbonneau