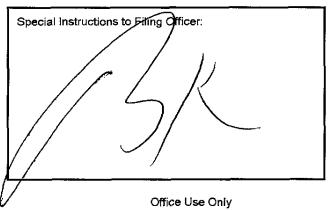
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 1333 N. DUVAL STREET, TALLAHASSEE, FL 32303 PHONE: (800) 435-9371; FAX: (866) 860-8395

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NAME:

RXPERT #2, LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST:

\$125 + \$30= \$155

RETURN: CERTIFIED COPY

ACCOUNT: FCA000000015

AUTHORIZATION:

THE THE

	70,70
RXPERT #2 LLC	Stop 14
(Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or "L.C.,"
A PROPERCY IN TX A 3.3	` <u>`</u>
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
•	
Principal Office Address:	Mailing Address:
510 South Pine Avenue	7272 Wurzbach Road, Suite 902
Ocala, FL 34471	San Antonio, TX 78240
	•
	me
4000 Namila December Co	
1333 North Duval Street Florida street address (P.O. Box NOT acceptable)	
rionas street	• • •
Tallahassee	FL 32303
City, Sta	te, and Zip
liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S
Registered Agent's Sig	mature (REQUIRED) MICHARI W. 145HIEY

(CONTINUED) Page 1 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR RXPERT, INC. 80 Surfview Drive Palm Coast, FL 32137 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member. (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.) Ruben Flores Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation

ARTICLE IV- Manager(s) or Managing Member(s):

Page 2 of 2

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)