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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : SHUTTS & BOWEN, LLP

Account Number : 076447000313 Phone : (305)358-6300

Fax Number : (305)381-9982

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED 6 MAY 15 PM 12: 22 415,1014 OF CORPORATIO

SALUD AMERICANA, LLC

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ARTICLES OF ORGANIZATION

<u>ARTICLE I</u> Name

The name of the Limited Liability Company (the "Company") is:

SALUD AMERICANA, LLC

<u>ARTICLE 11</u> Address

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

230 Westward Drive Miami Springs, Florida 33166

ARTICLE III Registered Agent, Registered Office, and Registered Agent's Signature

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

Antonio Feijoo 230 Westward Drive Miami Springs, Florida 33166

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles, 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.

Title: PRESIDENT

Date: May /2,2006

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