

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

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

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Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
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Fax Number : (305)675-2811

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Camille Lauren Healthcare Provider, LLC

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED
LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

CAMILLE LAUREN HEALTHCARE PROVIDER, LLC

ARTICLE II: Address

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

42 PINE TREE DRIVE

PALM COAST, FL 32164

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**

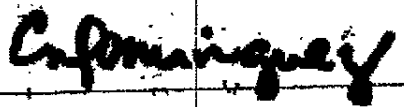
The name and the Florida street address of the registered agent are:

CEFERINA N. DOMINGUEZ

6 RYAN DRIVE

PALM COAST, FLORIDA 32164

Having been named as registered agent 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.

X 

Ceferina N. Dominguez / Registered Agent's Signature

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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CAMILLE LAUREN HEALTHCARE PROVIDER, LLC

ARTICLE V: MEMBERS (optional)

MANAGING MEMBER:

CEFERINA N. DOMINGUEZ
6 RYAN DRIVE
PALM COAST, FLORIDA 32164

MANAGING MEMBER:

CLARENCE C. BUGAYONG
6 RYAN DRIVE
PALM COAST, FLORIDA 32164

MANAGING MEMBER:

SALLY D. BUGAYONG
6 RYAN DRIVE
PALM COAST, FLORIDA 32164

MANAGING MEMBER:

DENNIS N. DOMINGUEZ
6 RYAN DRIVE
PALM COAST, FLORIDA 32164

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x *C. Dominguez*

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.)

CEFERINA N. DOMINGUEZ

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