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SECRETARY OF STATE

#### Borden R. Hallowes

Attorney at Law

157 Hampton Point Drive, Ste. 3 St. Augustine, FL 32092 Phone: (904) 287-8595 1-888-287-8595

Fax: (904) 819-9228

June 28, 2006

Secretary of State Corporate Division State Capitol Building Tallahassee, FL 32304

> RE: Children's Health Associates of Gateway, LLC

> > bent borns

Children's Health Associates of Emerson, LLC Children's Health Associates of Tallahassee, LLC Children's Health Associates of Ormond Beach, LLC Children's Health Associates of Daytona Beach, LLC Children's Health Associates of Maclenny, LLC Children's Health Associates of Arlington, LLC

#### Dear Sir or Madam:

Enclosed herewith are the originals and one (1) copy of the seven (7) Articles of Incorporation with regard to the above named corporations. Please find enclosed our firm's check for the necessary fees for the filing of these documents.

Please provide a certified copy of each Articles of Incorporation to the undersigned.

Very truly yours,

Borden R. Hallowes

Borden Ballows



September 11, 2006

BORDEN R. HALLOWES, ESQ. 157 HAMPTON POINT DRIVE SUITE 3 ST. AUGUSTINE, FL 32092

SUBJECT: CHILDREN'S HEALTH ASSOCIATES OF ARLINGTON, LLC

Ref. Number: W06000035322

We have received your document for CHILDREN'S HEALTH ASSOCIATES OF ARLINGTON, LLC and check(s) totaling \$490.00. However, your check(s) and document are being returned for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 806A00049758

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### **ARTICLE I – Name:**

The name of the Limited Liability Company is:

Children's Health Associates of Arlington, LLC

#### <u>ARTICLE II – Address:</u>

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

**Principal Office Address:** 

**Mailing Address:** 

5555 Fort Caroline Road Jacksonville, Florida 32277

5555 Fort Caroline Road Jacksonville, Florida 32277

### ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Borden R. Hallowes, Esquire 157 Hampton Point Drive, Suite 3 St. Augustine, Florida 32092

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 as provided for in Chapter 608, F.S.

Registered Agent's Signature

(CONTINUED)
Page 1 of 2

#### <u>ARTICLE IV - Manager(s) or Managing Member(s):</u>

The name and address of each Manager or Managing Member is as follows:

<u>Title</u> :	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
MGR	John M. Assi, M.D.  5555 Fort Caroline Road  Jacksonville, Florida 3227	<del></del>	
<del></del>	CLE V - Effective date:	06 SEI SECRE TALLA	
Date of Filing		FILED SEP 19 AM 9: CRETARY OF SI LLAHASSEE, FLO	
REQUIRED SIGNATURE:		9: 54 STATE FLORIDA	
Signature of	den Challows Esa a member or an authorized representative of a	nember.	
•	e with section 608.408(3), Florida Statutes, the exentitutes an affirmation under the penalties of perjulare true.)		
Boro	den R. Hallowes, Attorney		