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FOWLER WHITE BURNETT

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

SJS HEALTH, LLC

Certificate of Status	0
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## ARTICLES OF ORGANIZATION

OF

## SJS HEALTH, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLE I

The name of the limited liability company formed hereby is SJS HEALTH, LLC (the "Limited Liability Company").

#### **ARTICLE II**

The duration of the Limited Liability Company shall be perpetual.

### ARTICLE III

The principal office and mailing address of the Limited Liability Company shall be as follows:

c/o Sobel Co. 26400 West Twelve Mile, Suite 50 Southfield, MI 48034

#### ARTICLE IV

The Registered Agent of the Limited Liability Company and his street address in the State of Florida are as follows:

Fred K. Lickstein, Esq. 1395 Brickell Avenue, 14th Floor Miami, Florida 33131 Audit No. H 06000269401 3

#### **ARTICLE V**

The Limited Liability Company shall be manager-managed. The name and address of the initial Manager is:

> Jeffrey Sobel c/o Sobel Co. 26400 West Twelve Mile, Suite 50 Southfield, MI 48034

> > as Authorized Representative of the Members

STATE OF FLORIDA **COUNTY OF MIAMI-DADE** Before me personally appeared Fred K. Lickstein, as Authorized Representative of the Members, □ who is personally known to me, or □ who produced \_ \_ as identification, to be the person who executed the foregoing Articles of Organization. In witness whereof I have hereunto set my hand and official seal this belt day of

NOTARY PUBLIC-STATE OF FLORIDA **4** Judith D. Rodman Commission # DD469468 Expires: OCT. 18, 2009 Bonded Tius, Atlantic Brinding Co., Inc.

My Commission expires:

Audit No. H06000269401 3

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# OF RESIDENT AGENT AND ACCEPTANCE OF DESIGNATION

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

- 1. The name of the limited liability company is SJS HEALTH, LLC.
- 2. The name and address of the Registered Agent and Office is:

Fred K. Lickstein, Esq. 1395 Brickell Avenue, 14th Floor Miami, Florida 33131

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the 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 am familiar with and accept the obligations of my position as Registered Agent.

Fred K. Lickstein, Registered Agent

Date: November 6 2006

SJS HEALTH, LLC

Fred K. Lickstein.

as Authorized Representative

of the Members

Audit No. H06000269401 3

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SECRETARY OF STATE