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To:  
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Fax Number : (850) 205-0383

From:  
Account Name : HAILE, SHAW & PFAFFENBERGER, P.A.  
Account Number : 076326003550  
Phone : (561) 627-8100  
Fax Number : (561) 622-7603

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

South Florida Maximum Health, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
OF  
SOUTH FLORIDA MAXIMUM HEALTH, LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida.

**ARTICLE I. NAME**

The name of the limited liability company is **SOUTH FLORIDA MAXIMUM HEALTH LLC.**

**ARTICLE II. ADDRESS**

The mailing address and the street address of the principal office of the limited liability company is 2925 10<sup>th</sup> Avenue, Suite 201-C, Lake Worth, Florida 33461.

The name and street address of the initial registered agent of the limited liability company is Haile, Shaw & Pfaffenberger, P.A., 660 U.S. Highway One, Third Floor, North Palm Beach, Florida 33408.

**ARTICLE III. TERM OF EXISTENCE**

This limited liability company is to exist perpetually.

  
Philip M. DiComo, Authorized Representative

*Signature of a member or 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.)

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is SOUTH FLORIDA MAXIMUM HEALTH, LLC.
2. The name and address of the registered agent and office is:

Haile, Shaw & Pfaffenberger, P.A.  
660 U.S. Highway One, Third Floor  
North Palm Beach, Florida 33408

*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, the undersigned hereby accepts the appointment as registered agent and agree to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent.*

HAILE, SHAW & PFAFFENBERGER, P.A.

  
Philip M. DiComo

Date: January 23, 2007

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