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From:

Account Name : A.B.S. OF JACKSONVILLE, INC.

Account Number : 120010000215

Phone : (904) 777-1533

Fax Number : (904) 777-1717

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Dr. Keven Reed, O.D., LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANYFILED
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TALLAHASSEE, FLORIDA**ARTICLE I. NAME:**

The name of the Limited Liability Company is: Dr. Keven Reed, O.D., LLC

ARTICLE II. ADDRESS:

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

1651 Country Walk Drive
Orange Park, FL 32003**ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:**

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

Keven Reed, O.D.
1651 Country Walk Drive
Orange Park, FL 32003

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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, Florida Statutes.

Keven Reed, O.D.
Keven Reed, O.D./ Registered Agent

29 JAN 2007
Date

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ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title:
MGR.Name and Address:
Keven Reed, O.D.
1651 Country Walk Drive
Orange Park, FL 32003**ARTICLE V. EFFECTIVE DATE**

The effective date of this document shall be January 29, 2007.

REQUIRED SIGNATURE:IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this 29 day of JAN, 2007.Keven Reed, O.D.
Keven Reed, O.D., Member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true)

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