Florida Department of State

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To:

Division of Corporations

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From: 🖊

ACCOUNT Name : AKERMAN, SENTER

Account Number : 07

: AKERMAN, SENTERFITT & EIDSON, P.A. : 075471001363

Account Number Phone

(305)374~5600

Fax Number

(305) 374-5095

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LORIDA/FOREIGN LIMITED LIABILITY CO.

VIP MEDICAL HOTEL, LLC

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ARTICLES OF ORGANIZATION

FOR

VIP MEDICAL HOTEL, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is: VIP MEDICAL HOTEL, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 11811 North Dale Mabry Highway, Tampa, Florida 33618.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

American Information Services, Inc. One S.E. Third Avenue, 28th 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 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 duries, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F S.

American Information Services, Inc.

ARTICLE IV - Management:

The Limited Liability Company is a manager-managed company.

Marshall R. Burack, Esq.
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.)

Marshall R. Burack, Esq.

Typed or printed name of signee

Signed and dated this Like day of May, 2007.

SECKLTARY OF STATE