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To: Division of Corporations
Fax Number : (850) 205-0383

From: *Nery A. Senterfitt, President*
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FLORIDA/FOREIGN LIMITED LIABILITY CO.**AKRON CLINICAL, LLC**

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**ARTICLES OF ORGANIZATION
OF
AKRON CLINICAL, LLC**

These Articles of Organization of Akron Clinical, LLC have been duly executed and are being filed by the undersigned authorized representative of a member to form a Florida limited liability company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608) as follows:

**ARTICLE I
NAME**

The name of the limited liability company formed hereby is Akron Clinical, LLC (the "Company").

**ARTICLE II
ADDRESS**

The principal place of business address and mailing address of the Company is 3998 FAU Boulevard, Suite 210, Boca Raton, Florida 33431.

**ARTICLE III
REGISTERED AGENT AND REGISTERED OFFICE**

The name and the Florida street address of the registered agent and registered office of the Company is CorpDirect Agents, Inc., 515 East Park Avenue, Tallahassee, Florida 32301.

IN WITNESS WHEREOF, the undersigned executed these Articles of Organization on the 24th day of September, 2007.

By:

Kim A. Hines

Kim A. Hines, 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).

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT AND REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OF THE
FLORIDA STATUTES, AKRON CLINICAL, LLC SUBMITS THE
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED AGENT AND
REGISTERED OFFICE IN THE STATE OF FLORIDA.

- (1) The name of the limited liability company is Akron Clinical, LLC.
- (2) The name and street address of the Florida registered agent and office are:

CorpDirect Agents, Inc.
515 East Park Avenue
Tallahassee, Florida 32301

*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 the 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 in Chapter
608, F.S.*

By: 
Name: Ricky Soto
Title: Assistant Secretary

Date: September 24, 2007

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