

Division of Corporations

Page 1 of 1

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Division of Corporations
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Allied Preferred Healthcare, LLC

G. MCLEOD

JAN 25 2008

EXAMINER

Certificate of Status	0
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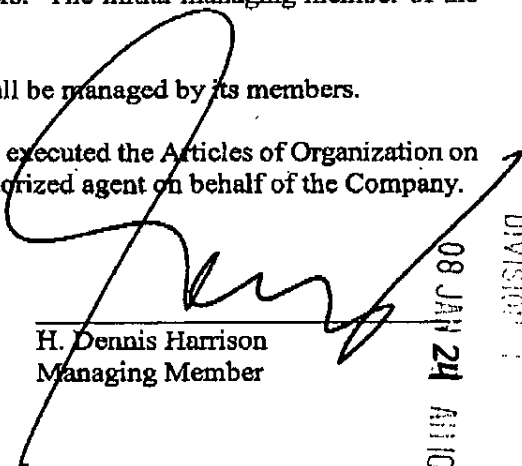
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**ARTICLES OF ORGANIZATION
OF
Allied Preferred Healthcare, LLC
A Florida Limited Liability Company**

The undersigned, being desirous of forming a limited liability company pursuant to Chapter 608, Florida Statutes, hereby certifies as follows:

1. Name of Limited Liability Company. The name of the limited liability company is **Allied Preferred Healthcare, LLC** a Florida limited liability company (the "Company").
2. Period of Duration. The period of duration for the Company shall be perpetual.
3. Principal Office. The mailing address and street address of the principal office of the Company shall be 7732 Silver Star Road, Suite 3, Orlando, Florida 32818, the mailing address of the Company shall be Post Office Box 560116, Orlando, Florida 32856.
4. Agent for Service of Process; Address of Registered Agent. The initial registered agent of the Company for service of process shall H. Dennis Harrison, 7732 Silver Star Road, Suite 3 Orlando, Florida 32856.
5. Right to Admit Additional Members. The Company shall have the right to admit additional members only with the consent of all members. The initial managing member of the Company is H. Dennis Harrison.
6. Member Management. The Company shall be managed by its members.

IN WITNESS WHEREOF, the undersigned has executed the Articles of Organization on this 24th day of January, 2008, in his capacity as an authorized agent on behalf of the Company.


H. Dennis Harrison
Managing Member

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ACCEPTANCE OF APPOINTMENT

The undersigned, H. Dennis Harrison, hereby acknowledges and accepts its appointment as registered agent of **Allied Preferred Healthcare, LLC**, a Florida limited liability company (the "Company"), and agrees to act in that capacity and to comply with the provisions of the Florida Limited Liability Company Act relative thereto. The undersigned is familiar with, and accepts, the obligations of a registered agent appointed as provided for in Chapter 608 of the Florida Statutes.

Dated this 24th day of January, 2008.

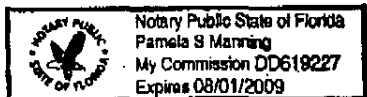

H. Dennis Harrison

ACKNOWLEDGMENT

STATE OF FLORIDA)
) SS:
COUNTY OF ORANGE)

The foregoing instrument was acknowledged before me this 24th day of January, 2008, by **H. Dennis Harrison**, as Registered Agent, who is personally known to me.


NOTARY PUBLIC



H08000020533 3