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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GREENBERG TRAURIG (WEST PALM BEACH)

Account Number : 075201001473 Phone : (561)650-7900 Fax Number : (561)655-6222

FLORIDA/FOREIGN LIMITED LIABILITY CO

Medical Exercise, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$125.00

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5/16/2008



ARTICLES OF ORGANIZATION OF MEDICAL EXERCISE, LLC

ARTICLE I - Name

The name of the Limited Liability Company is: Medical Exercise, LLC (the "Company")

ARTICLE II - Address

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

1026 Shady Lakes Circle Palm Beach Gardens, FL 33418

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

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

Madeline Sabatello 1026 Shady Lakes Circle Palm Beach Gardens, FL 33418

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided in Chapter 608, Florida Statutes.

Madeline Sabatello

Madeline Sabatello

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ARTICLE IV - Management

The Company is to be manager-managed, and is therefore, a manager-managed company. The name and address of the initial manager are:

Madeline Sabatello 1026 Shady Lakes Circle Palm Beach Gardens, FL 33418

Mudeline Schetille
Signature of a member or an 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.)

Madeline Sabatello
Typed or printed name of signee

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SECRETARY OF STATE
SECRETARY OF STATE