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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SAVAGE KRIM LAW FIRM

Account Number: 073617000267

Phone : (352)732-8944

Fax Number

: (352)867-0504

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Health Care Process Improvement, LLC

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7/15/2008

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ARTICLES OF ORGANIZATION

Of

HEALTH CARE PROCESS IMPROVEMENT, LLC a Florida Limited Liability Company

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be Health Care Process Improvement, LLC ("Company").

ARTICLÉ II - ADDRESS

The address of the principal office of the company shall be 2077 SW 37th St. Rd., Ocala, Florida 34471.

ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent and registered office of the Company in the state of Florida is John S. Simons, 121 NW 3rd Street, Ocala, Florida 34475.

ARTICLE IV - MANAGING MEMBERS

The name and address of each Managing Member are as follows:		SECR	nr 80	T
-	7 SW 37 th St. Rd. Ila, FL 34471	HASSE	15	i de la companya de l
Signed this 15 day of July, 2008	s. O	E FLO	AH 8:	
·	John S. Simons, Authorized Rer	一号記 vresentat	20 live	

STATE OF FLORIDA COUNTY OF MARION

The foregoing instrument was acknowledged before me this 15th day of 3 y 2008, by John S. Simons, Authorized Representative, who is personally known to me

Angela M. Priest
Expires: April 24, 2009
Western Surety Company
Commission #D0402860

Notary Public, State of Florida

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ACCEPTANCE OF REGISTERED AGENT

for

HEALTH CARE PROCESS IMPROVEMENT, LLC, a Florida Limited Liability Company

Undersigned hereby states that she is familiar with the obligations of Registered Agent for the Company as provided by Chapter 608, Florida Statutes, and accepts the appointment as Registered Agent for the Company.

Signed this 15 day of July , 2008.

John S. Simons, Registered Agent

STATE OF FLORIDA COUNTY OF MARION

The foregoing instrument was acknowledged before me this 15 day of 3, 2008, by John S. Simons, as Registered Agent, who is personally known to me.

Angela M. Priest
Expires: April 24, 2009
Western Surety Company
Commission #DD402880

Notary Public, State of Florida

G Chen Filos Marin, George Health Care Process Improvement, LLC Article Organization doc

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SECREMAY OF STATE
TAIL AHASSEE FLORIDA