

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L08000085187
FILED 8:00 AM
September 08, 2008
Sec. Of State
ncausseaux**

Article I

The name of the Limited Liability Company is:
ALTAMONTE 436 PET DOC HOSPITAL LLC

Article II

The street address of the principal office of the Limited Liability Company is:
262 ALTAMONTE SPRINGS DR
ALTAMONTE SPRINGS, FL. 327014339

The mailing address of the Limited Liability Company is:
206 TRANQUILITY COVE
ALTAMONTE SPRINGS, FL. 32701

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
LARRY ADKINS
206 TRANQUILITY COVE
ALTAMONTE SPRINGS, FL. 32701

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.

Registered Agent Signature: LARRY ADKINS

Article V

The name and address of managing members/managers are:

Title: MGRM
LARRY ADKINS
206 TRANQUILITY COVE
ALTAMONTE SPRINGS, FL. 32701

Title: MGRM
BRIAN ADKINS
2025 ARBOUR VIEW DRIVE
CARY, NC. 27519

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Article VI

The effective date for this Limited Liability Company shall be:

09/01/2008

Signature of member or an authorized representative of a member

Signature: LARRY ADKINS