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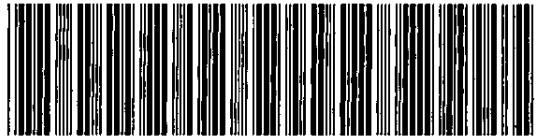
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D. BRUCE

JAN 05 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Leesburg Regional Medical Center Physician Services, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Philip J. Braun

(Name of Person)

Leesburg Regional Medical Center

(Firm/Company)

600 East Dixie Avenue

(Address)

Leesburg, FL 34748

(City/State and Zip Code)

For further information concerning this matter, please call:

Philip J. Braun

(Name of Person)

at (352) 323-5924

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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**ARTICLES OF ORGANIZATION
OF
LEESBURG REGIONAL MEDICAL CENTER PHYSICIAN SERVICES, LLC**

Pursuant to the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes the undersigned hereby submits these Articles of Organization for the purpose of forming a limited liability company.

**ARTICLE I
NAME**

The name of the limited liability company is Leesburg Regional Medical Center Physician Services, LLC. ("Company")

**ARTICLE II
ADDRESS**

The mailing and street address and county of the principal office of the Company shall be:

600 East Dixie Avenue
Leesburg, FL 34748
Lake County

**ARTICLE III
DURATION**

The Company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The Company will have a perpetual duration unless the Company is earlier dissolved as provided in these articles of organization.

**ARTICLE IV
REGISTERED OFFICE AND AGENT INFORMATION**

The name and street address and county of the registered office of the limited liability company shall be:

Philip J Braun
600 East Dixie Avenue
Leesburg, Florida 34748
Lake County

**ARTICLE V
PURPOSE**

The Company is organized and operated exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or any corresponding United States Internal Revenue Law ("the Code"). The Company shall support the educational mission of Leesburg Regional Medical Center, Inc and one or more other constituent institutions of the Central Florida Health Alliance, Inc. by performing functions for and generally carrying out the purposes of Hospitals and Healthcare including, without limitation, billing, acquiring, holding and disposing of

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investments on behalf of Leesburg Regional Medical Center, Inc. and organizations exempt from federal income tax under Section 501(c)(3) of the Code that provide financial and other support to the institutions or otherwise advance healthcare in the community.

(a) Notwithstanding any other provision of the Articles of Organization, the limited liability company shall not carry on any other activities not permitted to be carried on (i) by an entity exempt from federal income tax under Section 501(c)(3) of the Code or (ii) by an entity to which contributions are deductible under Section 170(c)(2) of the Code.

(b) No substantial part of the activities of this limited liability company shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and the limited liability company shall not participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf of, or in opposition to, any candidate for public office.

ARTICLE VI MANAGEMENT

The Company shall be *member-managed*, and all members shall be the managers of the limited liability company by virtue of their status as members.

The name and address of the members of the Company are:

Name:	Address:	Capacity:
Leesburg Regional Medical Center, Inc.	600 East Dixie Avenue Leesburg, FL 34748	Member

ARTICLE VII DISSOLUTION

In the event of the termination, dissolution or winding up of the affairs of the Company in any manner or for any reason whatsoever, the member shall, after paying or making provision for payment of all liabilities of the Company, distribute all of the remaining assets and property of the Company to its members all of whom must be governmental entities or organizations exempt under Section 501(c)(3) of the Code as required by the limited liability company's operating agreement.

IN WITNESS WHEREOF, the undersigned as authorized representative of the Member and Organizer have made and subscribed these Articles of Organization at Leesburg, FL this the 30th day of December, 2008.

Leesburg Regional Medical Center, Inc.

By: _____

Lee S. Huntley, CEO

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STATE OF FLORIDA)
COUNTY OF LAKE)

The foregoing instrument was acknowledged before me this 30th day of December, 2008, by Lee S. Huntley, CEO of Leesburg Regional Medical Center, Inc., who is personally known to me or has produced _____ as identification.

Marlene Kimball

NOTARY

My commission expires:

ACCEPTANCE OF REGISTERED AGENT



The undersigned, being the person named in the articles of organization of Leesburg Regional Medical Center Physician Services, LLC, as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligation of the position of registered agent.

Philip J. Braun

Philip J. Braun
Registered Agent

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