

Division of Corporations

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Florida Department of State
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L. SELLERS

MAR 25, 2009

To:

Division of Corporations
Fax Number : (850) 617-6383

EXAMINER

From:

Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

FLORIDA/FOREIGN LIMITED LIABILITY CO.**GILSON MEDICAL SOFTWARE, LLC**

Certificate of Status	0
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Fax Message

To:

Fax: 1-850-617-6383

From: Isabelle Klein

Date: 3/25/2009 11:39 AM

Pages: 1 of 5 (including this page)

Subject: Gilson Medical Software, LLC

Articles of Organization.

Isabelle Klein, Legal Assistant
to Gregory J. Blodig and
Ellen Gilmore
Greenspoon Marder, P.A.
100 West Cypress Creek Road, Suite 700
Ft. Lauderdale, FL 33309
(954) 491-1120 Ext. 1026

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**ARTICLES OF ORGANIZATION
OF
GILSON MEDICAL SOFTWARE, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is Gilson Medical Software, LLC.

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 401 E. Las Olas Boulevard, Fort Lauderdale, Florida 33301.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this Limited Liability Company is Greenspoon Marder, P.A., 100 W. Cypress Creek Road, Suite 700, Fort Lauderdale, Florida 33309.

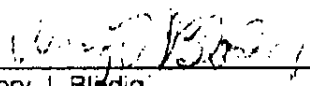
ARTICLE V - Management:

The Limited Liability Company is to be managed by a manager or managers and the name and address of the initial manager who is to serve as manager is:

Gilson Software Solutions, LLC
401 E Las Olas Boulevard
Fort Lauderdale, Florida 33301

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Whereof, the undersigned member has executed these Articles the 25th day of March, 2009.



Gregory J. Blodig,
Authorized Representative of Member

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

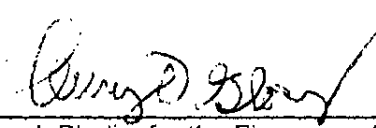
Gilson Medical Software, LLC
2. The name and address of the registered agent and office is:

Greenspoon Marder, P.A. (the "Firm")
100 W. Cypress Creek Road, Suite 700
Fort Lauderdale, Florida 33309

By: 

Gregory J. Blodig, for the Firm

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, the Firm hereby accepts the appointment as registered agent and agrees to act in this capacity. The Firm further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the Firm is familiar with and accepts the obligations of its position as registered agent.



Gregory J. Blodig, for the Firm

(Signature)

March 25, 2009

(Date)

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