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To:
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From:
Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Highlands Advanced Rheumatology and Arthritis Center, P.L.

Certificate of Status	0
Certified Copy	1
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EXAMINER

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**Articles Of Organization
For
Highlands Advanced Rheumatology and Arthritis Center, P.L.**

ARTICLE I - Name

The name of the Professional Limited Liability Company is **Highlands Advanced Rheumatology and Arthritis Center, P.L.**

ARTICLE II - Address

The mailing address and street address of the Professional Limited Liability Company is:

3750 Emergency Lane, Suite 3
Sebring, FL 33870

ARTICLE III - Professional Services Rendered

The Professional Limited Liability Company shall render medical services.

ARTICLE IV - Registered Agent and Registered Address

The name and the street address of the registered agent is:

Erin Smith Aebel, Esq.
Shumaker, Loop & Kendrick, LLP
101 East Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

ARTICLE V - Managing Member

The name and address of the managing member is:

Alexander Torres, M.D.
3750 Emergency Lane, Suite 3
Sebring, FL 33870

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TALLAHASSEE, FLORIDA

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization as an authorized representative of a Member this 12th day of May, 2009.



Erin Smith Aebel, Esq.

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.)

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TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED PROFESSIONAL LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the professional limited liability company is Highlands Advanced Rheumatology and Arthritis Center, P.L.
2. The name and the Florida street address of the registered agent are:


Erin Smith Aebel, Esq.
Shumaker, Loop & Kendrick, LLP
101 East Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

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TALLAHASSEE, FLORIDA

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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.


Erin Smith Aebel, Esq.
Registered Agent

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