

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

L10000029800
FILED 8:00 AM
March 17, 2010
Sec. Of State
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Article I

The name of the Limited Liability Company is:
PROFESSIONAL CARE MANAGEMENT, P.L.

Article II

The street address of the principal office of the Limited Liability Company is:
5475 N.W. ST. JAMES DRIVE
156
PORT ST. LUCIE, FL. 34983

The mailing address of the Limited Liability Company is:
5475 N.W. ST. JAMES DRIVE
156
PORT ST. LUCIE, FL. 34983

Article III

The purpose for which this Limited Liability Company is organized is:
PROVIDING PROFESSIONAL SERVICES TO THE PUBLIC PERMITTED TO
BE PERFORMED AND PROVIDED BY A LICENSED ADVANCED REGISTERED
NURSE PRACTITIONER AND ALL BUSINESS PURPOSES RELATED OR
INCIDENT THERETO.

Article IV

The name and Florida street address of the registered agent is:
CHRISTOPHER L SLACK
4632 S. 25 STREET
FORT PIERCE, FL. 34981

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: CHRISTOPHER L. SLACK

Article V

The name and address of managing members/managers are:

Title: MGRM
ELIZABETH A HEILMAN
5475 N.W. ST. JAMES DRIVE #156
PORT ST. LUCIE, FL. 34983

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Article VI

The effective date for this Limited Liability Company shall be:

03/12/2010

Signature of member or an authorized representative of a member

Signature: BROOKE D. AUSTIN