Electronic Articles of Organization
For
Florida Limited Liability Company

L10000103355
FILED 8:00 AM
October 04, 2010
Sec. Of State
gmcleod

Article I

The name of the Limited Liability Company is:

ARISTOCRAT REHAB LLC

Article II

The street address of the principal office of the Limited Liability Company is:

10949 PARNU ST
NAPLES, FL. 34109

The mailing address of the Limited Liability Company is:

10949 PARNU ST
NAPLES, FL. 34109

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:

JOHN WARREN
3611 TRANSMITTER RD
PANAMA CITY, FL. 32404

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: JOHN WARREN

Article V

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The name and address of managing members/managers are:

Title: MGR
HEALTH PROPERTIES LLC
3611 TRANSMITTER RD
PANAMA CITY, FL. 32404

Signature of member or an authorized representative of a member

Signature: JOHN WARREN