

12/22/2011

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FLORIDA LIMITED LIABILITY CO.
Fort Myers Family Care and Rehabilitation Center, P.

Certificate of Status	0
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EXAMINER

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**Articles of Organization
for
Fort Myers Family Care and Rehabilitation Center, P.L.**

ARTICLE I - Name

The name of the Professional Limited Liability Company is **Fort Myers Family Care and Rehabilitation Center, P.L.**

ARTICLE II - Address

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

3677 E. Central Avenue Suite E
Fort Myers, Florida 33901

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 are as follows:

Erin Smith Aebel, Esq.
c/o Shumaker, Loop & Kendrick, LLP
101 E. Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization as an authorized representative of a Member this 22nd day of December 2011.


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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**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 **Fort Myers Family Care and Rehabilitation Center, P.L.**

2. The name and the Florida street address of the registered agent are as follows:

Erin Smith Aebel, Esq.
c/o Shumaker, Loop & Kendrick, LLP
101 E. Kennedy Boulevard
Suite 2800
Tampa, Florida 33602

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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