Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H120001397923)))



HI 20001397923ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

From:

Division of Corporations

Fax Number : (850)617-6383

D. Guerra

Account Name : AKERMAN SENTERFITT (FT. LAUDERDALE)

Account Number : I19980000010 Phone : (954)463-2700

Fax Number : (954)463-2700

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

NECEIVED
12 MAY 25 FN 3-59
SECRETARY OF STATE
LLAHASSEE. FLORIDA

FLORIDA LIMITED LIABILITY CO. MEDIVIBE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	-02
Estimated Charge	\$155.00

A. LUNT

MAY 29 2011

EXAMINER

H12000139792

ARTICLES OF ORGANIZATION

OF

MEDIVIBE, LLC
(a Florida limited liability company)

ARTICLE I

The name of the limited liability company (the "Company") is: Medivibe, ELC

ARTICLE II
ADDRESS

The mailing address and street address of the principal office of the Company are: 5455 N. Federal Highway, Suite O, Boca Raton, FL 33487.

ARTICLE III DURATION

The period of duration for the Company shall begin on the date of filing these Articles of Organization with the Florida Secretary of State and shall have a perpetual existence and duration, until terminated in accordance with applicable law.

ARTICLE IV INITIAL REGISTERED OFFICE AND AGENT

The name and Florida street address of the Company's initial registered agent are: Glenn Riser, 4776 New Broad Street, Suite 200, Orlando, FL 32814.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 24th day of May, 2012.

Glenn Riser

Authorized Representative

H12000139792

CERTIFICATE OF ACCEPTANCE BY REGISTERED AGENT

Pursuant to the provisions of the Florida Limited Liability Company Act, the undersigned submits the following statement in accepting the designation as registered agent of MEDIVIBE, LLC. a Florida limited liability company (the "Company"), in the Company's Articles of Organization:

Having been named as registered agent and to accept service of process for the Company at the registered office designated in the Company's Articles of Organization, the undersigned accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and the undersigned is familiar with and accepts the obligations of his position as registered agent.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Acceptance this $\frac{24n}{3}$ day of May, 2012.

Glenn Riser