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Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC
Account Number : 110432003053
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FLORIDA LIMITED LIABILITY CO.
Palm Plaza Medical Center, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

A. LUNT

JUL - 2 2011

EXAMINER

**ARTICLES OF ORGANIZATION
OF
PALM PLAZA MEDICAL CENTER, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is **PALM PLAZA MEDICAL CENTER, LLC**.

ARTICLE II: - Address

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

c/o Martin G. Burkett, Esq.
One S.E. Third Avenue, 25th Floor
Miami, Florida 33131


ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

**Corporate Creations Network, Inc.
11380 Prosperity Farms Road, Suite 221E
Palm Beach Gardens, FL 33410**

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 as provided for in Chapter 608, F.S.

CORPORATE CREATIONS NETWORK, INC., as Registered Agent

By: 
Name: **Valerie Hawk-Donohue**, Special Secretary
Title: _____

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization at Miami, Florida on June 29, 2012.


Alex Goone, as 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.)

Alex Goone
Typed or printed name of signer

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