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Email Address: everett.wilson@akerman.com

FLORIDA LIMITED LIABILITY CO.
CHOICES HEALTHCARE, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION
OF
CHOICES HEALTHCARE, LLC

ARTICLE I: - Name
The name of the Limited Liability Company is **CHOICES HEALTHCARE, LLC.**

ARTICLE II: - Address
The mailing address and street address of the principal office of the Limited Liability Company is:

19301 SW 218 Street
Miami, Florida 33170

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature
The name and the Florida street address of the registered agent are:

Rocio Fleites
19301 SW 218 Street
Miami, Florida 33170

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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.

Rocio Fleites, as Registered Agent

ARTICLE IV: - Management
The Limited Liability Company is to be managed by one Manager or more Managers and is, therefore, a manager - managed company.

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ARTICLE V: - Manager
The name and address of the Manager is as follows:

MGR *Rocio Fleites*
19301 SW 218 Street
Miami, Florida 33170

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization at Miami, Florida on August 9th, 2013.

J. Everett Wilson, 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.)

J. Everett Wilson
Typed or printed name of signee

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