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FLORIDA LIMITED LIABILITY CO. Gladiolus Drive, LLC

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FAX AUDIT NO.: H14000010000 3

ARTICLES OF ORGANIZATION

OF

GLADIOLUS DRIVE, LLC

ARTICLE I NAME

The name of the limited liability company shall be Gladiolus Drive, LLC (the "Company"), and it shall be organized as a Florida limited liability company under Chapter 605, Florida Statutes.

ARTICLE II STREET ADDRESS AND MAILING ADDRESS

The street address and mailing address of the principal office of the Company is: 4371 Veronica S. Shoemaker Boulevard, Fort Myers, Florida 33916.

ARTICLE III REGISTERED OFFICE AND REGISTERED AGENT

The name and address of the registered agent of the Company are: William N. Harwin, M.D., 4371 Veronica S. Shoemaker Boulevard, Fort Myers, Florida 33916.

ARTICLE IV PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

ARTICLE V MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager"), and is, therefore, a manager-managed company.

IN WITNESS WHEREOF, the undersigned, being an Authorized Representative of the Company, has duly executed these Articles of Organization as of this 14th day of January, 2014.

William N. Harwin, M.D., Authorized

Representative

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: Gladiolus Drive, LLC.
- 2. The name and address of the registered agent and office are:

William N. Harwin, M.D.
4371 Veronica S. Shoemaker Boulevard
Fort Myers, Florida 33916

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.

William N. Harwin, M.D.,

Registered Agent

Date: January 14, 2014

MANANTE PLORIDA

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