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Florida Department of State
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FLORIDA LIMITED LIABILITY CO.
West Orange Winter Garden Dialysis Center, LLC

Certificate of Status	0
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FAX AUDIT #

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**ARTICLES OF ORGANIZATION
OF
West Orange Winter Garden Dialysis Center, LLC**

ARTICLE I NAME

The name of the limited liability company is: West Orange Winter Garden Dialysis Center, LLC

ARTICLE II ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be:
10000 West Colonial Dr. Suite 180, Ocoee, FL, Florida 34761.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Banji Awosika, 10000 West Colonial Dr. Suite 180, Ocoee, FL, Florida 34761. Located in the County of Orange.

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 605, F.S..

Signature: _____

Banji Awosika

Date: _____

5/8/15**ARTICLE IV MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the members and the name and address of the member of the Limited Liability Company is:
Banji Awosika, 10000 West Colonial Dr. Suite 180, Ocoee, FL, Florida 34761

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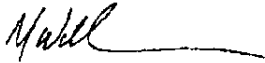
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ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.



Date: May 5, 2015

(In accordance with section 605.0203 (1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8020 Excelsior Dr., Suite 200, Madison,

WI 53717

608-827-5300

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