

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L16000035663
FILED 8:00 AM
February 19, 2016
Sec. Of State
thampton**

Article I

The name of the Limited Liability Company is:

BURNS MEDICAL CENTER LLC

Article II

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

481 N HARBOR CITY BLVD
MELBOURNE, FL. 32935

The mailing address of the Limited Liability Company is:

PO BOX 361263
MELBOURNE, FL. 32936

Article III

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

ROBERT L BURNS JR
481 N HARBOR CITY BLVD
SUITE 101
MELBOURNE, FL. 32935

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.

Registered Agent Signature: ROBERT L BURNS JR

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
ROBERT L BURNS JR
481 N HARBOR CITY BLVD
MELBOURNE, FL. 32935

Title: MGR
MICHAEL MACKAY
481 N HARBOR CITY BLVD
MELBOURNE, FL. 32935

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Article V

The effective date for this Limited Liability Company shall be:

02/19/2016

Signature of member or an authorized representative

Electronic Signature: ROBERT L BURNS JR

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.