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Division of Corporations

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FLORIDA LIMITED LIABILITY CO.  
Bethesda Health Quality Alliance, LLC

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**ARTICLES OF ORGANIZATION  
OF  
BETHESDA HEALTH QUALITY ALLIANCE, LLC**

The undersigned organizer, who is the authorized representative of Bethesda Health Quality Alliance, LLC (the "Company") under the Florida Revised Limited Liability Company Act (the "Act"), hereby adopts the following Articles of Organization:

**ARTICLE I - NAME**

The name of the Company is Bethesda Health Quality Alliance, LLC.

**ARTICLE II - PRINCIPAL OFFICE**

The street address of the principal office of the Company is 2815 South Seacrest Boulevard, Boynton Beach, Florida 33435 and the mailing address of the Company is the same.

**ARTICLE III - INITIAL REGISTERED AGENT AND ADDRESS**

The name and street address of the initial registered agent are Kimberly Shapiro, Esq. and 2815 South Seacrest Boulevard, Boynton Beach, Florida 33435.

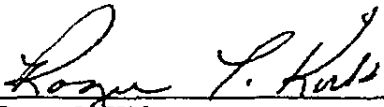
**ARTICLE IV - MANAGEMENT**

The Company shall be a manager-managed limited liability company.

**ARTICLE V - EFFECTIVE DATE**

These Articles of Organization shall be effective as of March 13, 2017.

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization on this 10<sup>th</sup> day of March, 2017.

  
\_\_\_\_\_  
Roger L. Kirk  
President & CEO

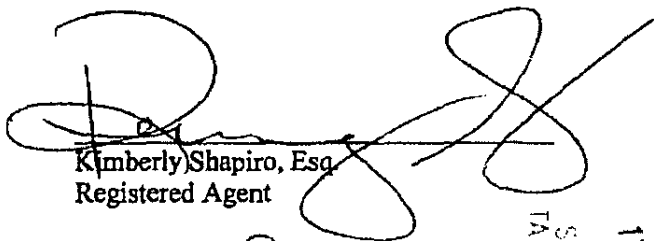
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**CERTIFICATE OF DESIGNATION  
OF REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 605.0201, Florida Statutes, the undersigned submits the following statement to designate a registered office and registered agent in the state of Florida.

1. The name of the Limited Liability Company is Bethesda Health Quality Alliance, LLC.
2. The name and mailing address of the registered agent are Kimberly Shapiro, Esq. and 2815 South Seacrest Boulevard, Boynton Beach, Florida 33435.

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, THE UNDERSIGNED HEREBY ACCEPTS THE APPOINTMENT AS REGISTERED AGENT AND AGREES TO ACT IN THIS CAPACITY. THE UNDERSIGNED FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF HER DUTIES AND IS FAMILIAR WITH AND ACCEPTS THE OBLIGATIONS OF HER POSITION AS REGISTERED AGENT.

  
Kimberly Shapiro, Esq.  
Registered Agent

Date: March 10 2017.

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