MAY-29-97 THU 10:31 KRAMER GREEN ZUCKERMAN K FAX NO. 9549811605

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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: KRAMER, GREEN, ZUCKERMAN & KAHN, P.A.

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NAME: MIAMI ARTIFICIAL KIDNEY CENTER, L.C.

AUDIT NUMBER,..... H97000008796

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# ARTICLES OF ORGANIZATION FOR MIAMI ARTIFICIAL KIDNEY CENTER, L.C. A FLORIDA LIMITED LIABILITY COMPANY

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SEDICITAL SEE FLORIN
TALLAHASSEE FLORIN

ARTICLE I

The name of the Company is MIAMI ARTIFICIAL KIDNEY CENTER, L.C.

## ARTICLE II DURATION

The Company shall commence its existence upon the date that these Articles of Organization are accepted for filing with the Florida Department of State and shall continue until December 31, 2025, unless sooner dissolved as provided by law or by contract.

# ARTICLE III ADDRESS

The mailing address and the street address of the principal office of the Company Is do KRU Medical Ventures, 7061 Cypress Road, Suite 104, Plantation, Florida 33317.

# ARTICLE IV ADMISSION OF ADDITIONAL MEMBERS

The remaining members have the right to admit additional members only if unanimously agreed in writing by the remaining members. The terms and conditions for the admission shall be as stated in the applicable written agreements. The written agreements contemplated in this article include without limitation the initial Operating Agreement (Regulations) and any duly adopted amendments.

# ARTICLE V MEMBERS' RIGHTS TO CONTINUE BUSINESS

If unanimously agreed in writing, which writings may include without limitation the original Operating Agreement (Regulations) and any duly adopted amendments, remaining members of the Company will have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence

of any other event which terminates the continued membership of a member in the Company.

### ARTICLE VI MANAGEMENT

The management of the Company is reserved to a manager. The name and address of the first manager who is to serve as manager until its successor is elected and qualified is:

Miami Dialysis Center, Inc. c/o KRU Medical Ventures

7061 Cypress Road

Suite 104

Plantation, Florida 2331

Signature of Robert M. Kramer a member or authorized representative of a member

**~**\_..

### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of MIAMI ARTIFICIAL KIDNEY CENTER, L.C. deposes and says:

- 1) The above named limited liability company has at least two members.
- 2) The total amount of cash contributed by the member(s) is \$25,000.00.
- If any, the agreed value of property other than cash contributed by member(s) is \$0. A description of the property is attached and made a part hereto.

The total amount of cash or property anticipated to be contributed by member(s) is \$25,000.00. This total includes amounts from 2 and 3 above.

Signature of Robert M. Kramer, a member or authorized representative

of a member

Date:

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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#### CERTIFICATE OF DESIGNATION OF

### REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

 The name of the limited liability company is: MIAMI ARTIFICIAL KIDNEY CENTER, L.C.

2.	The name and address of the registered agent and office is:	7.	9	
	ROBERT M. KRAMER, ESQ. Kramer, Green, Zuckerman & Kahn, P.A. 4000 Hollywood Blvd. Suite 485 South Hollywood, Florida 33021	LLAHASSEE, FLORIDA	7 HAY 29 AH 10: 50	n 2 2
	Signature of Robert M. Kramer member or authorized representative of a member  Date:	_	•	

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.