F06800000

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

•	
Interlachen Rehabilitation	
imited Liability Company	9000028707892 -05/11/9901011015 ****285.00 ****285.00
Name 5/1/49 Availability 000 Document Examiner DCC Updater MC Updater MC Acknowledgement DCC	Art of Inc. File LTD Partnership File Eereign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Photo Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search
W. P. Verifyer DUC L9900003904 Signature	Fictitious Search Fictitious Owner Search
	Vehicle Search
D	Driving Record
Requested by: SILI 8:45	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 11, 1999

CAPITAL CONNECTION, INC. 417 E. VIRGINIA STREET, SUITE 1 TALLAHASSEE, FL 32302

SUBJECT: INTERLACHEN REHABILITATION, L.C.

Ref. Number: W99000010967

We have received your document for INTERLACHEN REHABILITATION, L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 499A00025689

ARTICLES OF ORGANIZATION

OF

INTERLACHEN REHABILITATION, L.C.

The undersigned certify that we have associated ourselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

ARTICLE I NAME AND PRINCIPAL OFFICE

The name of the limited liability company shall be INTERLACHEN REHABILITATION, L.C. and its principal office shall be located at 100 Tall Pine Trail, in the City of Satsuma, County of Putnam, State of Florida, and the mailing address is HC3, Box 840, Satsuma, Florida, 32189, but it shall have the power and authority to move the principal place of business and establish branch offices at any other place or places as the members may designate.

ARTICLE II PURPOSES AND POWERS

In addition to the powers authorized by the laws of the State of Florida for limited liability companies, the general nature of the business or businesses to be transacted, and which the limited liability company is authorized to transact, shall be as follows:

- 1. To engage in any activity or business authorized under the Florida Statutes.
- 2. In general, to carry on any and all incidental business; to have and exercise all the powers conferred by the laws of the State of Florida, and to do any and all things set forth in these Articles to the same extent as a natural person might or could do.
- 3. To purchase otherwise acquire, undertake, carry on, improve, or develop, all or any of the business, good will, rights, assets, and liabilities of any person, firm, association, or corporation carrying on any kind of business of a similar nature to that which this limited liability company is authorized to carry on, pursuant to the provisions of these Articles; and to hold, utilize, and in any manner dispose of the rights and property so acquired.
- 4. To enter into and make all necessary contracts for its business with any person, entity, partnership, association, corporation, domestic foreign, or of any domestic or foreign State, government, or governmental authority, or of any political or

SECULIAR IN SECTION

administrative subdivision, or department, and to perform and carry out, assign, cancel, or rescind any of such contracts.

- 5. To exercise all or any of the limited liability company powers, and to carry out all or any of the purposes, enumerated in these Articles and otherwise granted or permitted by law, while acting as agent, nominee, or attorney-in-fact for any persons or corporations, and perform any service under contact or otherwise for any corporation, joint stock company, association, partnership, firm, syndicate, individual, or other entity, and in this capacity or under this arrangement develop, improve, stabilize, strengthen, or extend the property and commercial interest of the property and to aid, assist, or participate in any lawful enterprise in connection with or incidental to the agency, representation, or service, and to render any other service or assistance it may lawfully do under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit.
- 6. To do everything necessary, proper, advisable, or convenient for the accomplishment of any of the purposes, or the attainment of any of the objects, or the furtherance of any of the powers set forth in these Articles, either alone or in association with others incidental or pertaining to, or going out of, or connected with its business or powers, provided the same shall not be inconsistent with the laws of the State of Florida.

The several clauses contained in this statement of the general nature of the business or businesses to be transacted shall be construed as both purposes and powers of this limited liability company, and statements contained in each clause shall, except as otherwise expressed, be in no way limited or restricted by reference to or inference from the terms of any other clause. They shall be regarded as independent purposes and powers.

Nothing contained in these Articles shall be deemed or construed as authorizing or permitting, or purporting to authorize or permit the limited liability company to carry on any business, exercise any power, or do any act which a limited liability company may not, under Florida laws, lawfully carry on, exercise, or do.

ARTICLE III DURATION

The duration of the limited liability company is perpetual.

ARTICLE IV MANAGEMENT

Management of this limited liability company is reserved to its members, whose names and addresses are as follows:

Melisa T. Crosby Route 1, Box 150 San Mateo, FL 32187

Shirley Cannon HC3 Box 840 Satsuma, FL 32189

Donna Wisker Route 4, Box 751A Palatka, FL 32177

ARTICLE V MEMBERSHIP RESTRICTIONS

Members shall have the right to admit new members by unanimous consent of all members. Contributions required of new members shall be determined as of the time of admission to the limited liability company.

A member's interest in the limited liability company may not be sold or otherwise transferred except with unanimous written consent of all members.

On the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of an other event that terminates the continued membership of a member in the limited liability company, the remaining members shall have the right to continue the business on unanimous consent of the remaining members.

ARTICLE VI CAPITAL CONTRIBUTIONS

Capital contributions in the amount of one thousand five hundred dollars cash shall be paid to the limited liability company by the three members in equal shares. Additional contributions will be made as required for investment purposes, as determined by unanimous consent of the members. Members will make contributions in equal shares.

ARTICLE VII INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the limited liability company is 100 Tall Pine Trail, City of Satsuma, County of Putnam, State of Florida, and the name of the company's initial registered agent at that address is Shirley Cannon.

The undersigned, being the original members of the limited

liability company, certify that this instrument constitutes the proposes Articles of Organization of Interlachen Rehabilitation.

Executed by the undersigned at Palatka FL on the Hard day of May 1999.

Melisa J. Crosby

Melisa T. Crosby

Shirley Cannon

Donna Wisker

99 NAY 20 PM 1: 30
SEGRETARY OF STATE

STATEMENT DESIGNATING REGISTERED AGENT AND OFFICE

STATE OF FLORIDA COUNTY OF PUTNAM

Pursuant to the provisions of Sections 608.407(1)(d) of the Florida Limited Liability Company Act, the limited liability company identified below submits the following statement in designating its registered office and registered agent in the State of Florida.

The name of the limited liability company is Interlachen Rehabilitation, L.C.

The name of the registered agent for Interlachen Rehabilitation, L.C. is Shirley Cannon and the street address of the company's principal office where the agent is located is 100 Tall Pine Trail, Satsuma, Florida.

This statement is to acknowledge that, as indicated above, Interlachen Rehabilitation has appointed me, Shirley Cannon, as its registered agent to accept service of process for the company at the place designated above in this certificate. I accept this 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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated the 14th day of May, 1999 37 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 1999 38 199

The foregoing instrument was acknowledged before me this Hay of May, 1999 by Shirley Cannon, agent on behalf of Interlachen Rehabilitation, a limited liability company. He/She is personally known to me or has produced FDC as identification.

Notary Public, State of Florida



STATE OF FLORIDA COUNTY OF PUTNAM

In compliance with FS §608.407(2), the undersigned member or authorized representative of a member of Interlachen Rehabilitation, L.C. deposes and says:

- 1. The limited liability company identified above has at lease two members.
- 2. The total amount of cash contributed by the members is ONE THOUSAND FIVE HUNDRED DOLLARS.
- 3. If any, the agreed value of property other than cash contributed by the members is NONE. A description of the property is attached as Exhibit N/A and made a part of this affidavit.
- 4. The total amount of cash or property anticipated to be contributed by the members is ONE THOUSAND FIVE HUNDRED DOLLARS. This total includes the amounts from 2 and 3 above.

Shiley Cannon 3

The foregoing instrument was acknowledged before me this 4/2 day of May , 1999, by Shirley (annon on behalf of Interlaction Rehabilitation, a limited liability company. He/She is personally known to me or has produced _n/a as identification.

