199000006135



ACCOUNT NO. : 072100000032

REFERENCE :

387534

4323655

AUTHORIZATION :

COST LIMIT :

ORDER DATE: September 27, 1999

ORDER TIME : 11:0 AM

ORDER NO. : 387534-005

CUSTOMER NO: 4323655

CUSTOMER: Ms. Jozette Chack-on

ANNIS MITCHELL COCKEY EDWARDS ANNIS MITCHELL COCKEY EDWARDS

Post Office Box 3433

Tampa, FL 33601

100002997441--6

DOMESTIC FILING

NAME:

PORT CHARLOTTE MANAGEMENT,

LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION _ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

Name Availability	MJH
Document Examiner	
Updater	
Updater Verifyer	
Acknowledgement	
W. P. Verifyer	



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

September 27, 1999

CSC

ATTN; JANINE LAZZARINI

SUBJECT: PORT CHARLOTTE MANAGEMENT, LLC

Ref. Number: W99000022259

Submission date original date. We have received your document for PORT CHARLOTTE MANAGEMENT, LLC and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

The fees for a limited liability company breakdown as follows: \$250 filing fee, \$35 for designation of registered agent, \$52.50 for an optional certified copy, and \$8.75 for an optional certificate of status.

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) 487-6967.

Michelle Hodges **Document Specialist**

Letter Number: 199A00047100

ARTICLES OF ORGANIZATION

OF

PORT CHARLOTTE HEALTHCARE ADVISORS, LLC

- 1. Name. The name of this limited liability company is PORT CHARLOTTE HEALTHCARE ADVISORS, LLC Florida limited liability company (the "Company").
- 2. <u>Duration</u>. The Company shall have perpetual existence, commencing upon the date of filing of these Articles of Organization with the Florida Department of State, unless these Articles of Organization or the operating agreement of the Company provide otherwise.
- 3. <u>Purpose</u>. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.
- 4. <u>Place of Business</u>. The mailing and street address of the Company's principal office is 701 North Wilder Road, Plant City, Florida 33566.
- 5. Registered Agent and Office. The name of the initial registered agent of the Company is John H. Rains, III. The street address of the initial registered agent of the Company is 201 North Franklin Street, Suite 2200, Tampa, Florida 33602.
- 6. <u>Additional Members</u>. Additional members to the Company may be admitted, but only upon the unanimous consent of all members of the Company at the time admission is sought.
- 7. <u>Termination of Membership</u>. Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or upon the occurrence of any other event which terminates the continued membership of a member in the Company, the Company shall be dissolved unless all remaining members agree in writing to continue the business of the Company.
- 8. <u>Management of the Company</u>. The management of the Company is reserved to the members. The Company shall initially be managed by its sole member, NHC/OP, L.P., which is located at 100 Vine Street, Murfreesboro, Tennessee 37130.

The undersigned executed these Articles of Organization effective as of July 1, 1999.

SOLE MEMBER:

NHC/OP, L.P., a Delaware limited partnership

By: NHC/Delaware, Inc.,

a Delaware corporation,

Its General Partner

By:

Richard F. LaRoche, Jr.

Vice President

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within-named Company, at the place designated herein, and being familiar with the obligations of that position, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

John H, Rains, III

601

3405-003-677625

AFFIDAVIT OF LIMITED LIABILITY COMPANY PURSUANT TO FLORIDA STATUTES SECTION 608.407(2)

I, Richard F. LaRoche, Jr., being the Vice President of NHC/Delaware, Inc., who is the General Partner of NHC/OP, L.P., who is the sole member of PORT CHARLOTTE HEALTHCARE ADVISORS, LLC a Florida limited liability company, hereinafter referred to as the "Company", who, upon being sworn, certifies as follows:

- 1. The Company has one (1) member.
- 2. The sole member of the Company has not contributed cash or property (other than cash) to the Company.
- 3. It is anticipated that no cash or property will be contributed in the future by the sole member of the Company.

Executed this 23th day of September, 1999, but effective July 1, 1999
FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief. (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.)

SOLE MEMBER:

NHC/OP, L.P., a Delaware limited partnership

By:

NHC/Delaware, Inc., a Delaware corporation,

Its General Partner

Richard F. LaRoche, Jr.

Vice President

3405-003-677625