



THE UNITED STATES GORPORATION	
ACCOUNT NO.: 07210000032	
REFERENCE: 396957 4323655	_
AUTHORIZATION:	0 66 31/10 38
COST LIMIT: \$ 125 Patricia Parit	CRETA OH OF
ORDER DATE : October 4, 1999	RY OF STATE CORPORATION
ORDER TIME : 4:08 PM	TATE ATIO
ORDER NO. : 396957-030	- - -
CUSTOMER NO: 4323655	
CUSTOMER: Ms. Jozette Chack-on ANNIS MITCHELL COCKEY EDWARDS ANNIS MITCHELL COCKEY EDWARDS Post Office Box 3433	
Tampa, FL 33601	
DOMESTIC FILING	· ·
NAME: NHC HEALTHCARE/DAYTONA BEACH, LLC	, .c
EFFECTIVE DATE:	RECEIV 99 OCT - 4 PM
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	= 5
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Christine Lillich EXAMINER'S INITIALS:	M1H

September <u>23</u>, 1999

Florida Department of State Division of Corporations

Re:

Consent for Use of Name

NHC HEALTHCARE/DAYTONA BEACH, LLC

Dear Madam or Sir:

The undersigned, on behalf of NHC HEALTHCARE/DAYTONA BEACH, INC., a Florida corporation (the "Corporation"), does hereby consent to the use of the name "NHC HEALTHCARE/DAYTONA BEACH, *LLC*" (the "LLC"), by the sole member named in the LLC's Articles of Organization.

Sincerely,

Richard F. LaRoche, Jr.

Vice President of NHC HealthCare/

Daytona Beach, Inc.

3405-003-677522

ARTICLES OF ORGANIZATION OF NHC HEALTHCARE/DAYTONA BEACH, LLC

1.	Name.	The	name	of	th	is	1	imited	liability	compar	ıy is	NHC
HEAL	THCARE/DA	YTONA	BEACH,	LI	LC	,	a	Florida	limited	liability	company	(the
"Com	oany").											

- 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 550 National Healthcare Drive, Daytona Beach, Florida 32114.
- 5. <u>Registered Agent and Office</u>. 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 on the _____ day of September, 1999

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

TILED ETARY OF STATE OF CORPORATION

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

Dated: 276 S. 1999

3405-003-677488