

Document Number Only

CT Corporation System  
660 East Jefferson Street  
Tallahassee, FL 32301  
Tel 850 222 1092  
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Attn: Jeff Netherton

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-12/22/99--01002--020  
\*\*\*\*195.00 \*\*\*\*195.00

CORPORATION(S) NAME

Adventa High-Tech Services, L.L.C.

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input checked="" type="checkbox"/> CUS
<input checked="" type="checkbox"/> (2)		<input checked="" type="checkbox"/> (2)
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
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Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
Acknowledgement \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

12/21/99

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TALLAHASSEE, FLORIDA  
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99 DEC 21 PM 2:38  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION  
OF  
ADVENTA HIGH-TECH SERVICES, L.L.C.

ARTICLE I - Name:

The name of the Limited Liability Company is ADVENTA HIGH-TECH SERVICES, L.L.C. (the "Company").

ARTICLE II - Address:

The mailing address and street address of the principal office of the Company is 735 State Road, Suite 434, Longwood, Florida 32750.

ARTICLE III - Duration and Purpose:

The period of duration for the Company shall be perpetual. The business of the Company is respiratory therapy/home medical equipment services, in furtherance of the exempt purpose of Southwest Volusia Healthcare Corporation, a Florida non-profit corporation (the "Hospital"), as stated under the Hospital's Articles of Incorporation.

ARTICLE IV - Management:

The Company is to be managed by the members (through their designated representatives) and the names and addresses of the initial managing members are as follows:

Southwest Volusia Healthcare Corporation  
1055 Saxon Boulevard  
Orange City, Florida 32763

Housecall Medical Resources, Inc.  
1600 Tamiami Trail  
Murdock, FL 33938

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ARTICLE V - Admission of Additional Members:

Members shall have the right to admit additional members as provided by the Florida Limited Liability Company Act.

ARTICLE VI - Members' Rights to Continue Business:

The death, retirement, resignation, expulsion, dissolution, bankruptcy, dissociation or withdrawal of any member, or the occurrence of any other event that terminates the continued membership of any member shall not cause the Company to be dissolved or its affairs to be wound-up, and upon the occurrence of any such event, the Company shall be continued without dissolution and without any affirmative action or requirement on the part of the members.

MEMBERS:

SOUTHWEST VOLUSIA HEALTHCARE  
CORPORATION, a Florida not-  
for-profit corporation

By: *Ariel DePrada*  
Name: Ariel DePrada  
Title: Assistant Secretary

HOUSECALL MEDICAL  
RESOURCES, INC.  
A Delaware Corporation

By: *T. L. Trimble*  
Name: T. L. Trimble  
Title: Assistant Secretary

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

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

1. The name of the limited liability company is: ADVENTA HIGH-TECH SERVICES, L.L.C.
2. The address of the registered agent and office is:  
T. L. Trimble  
Adventist Health System  
111 North Orlando Avenue  
Winter Park, Florida 32789

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by the 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 the obligations of my position as a registered agent.

  
\_\_\_\_\_  
T. L. Trimble

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