

~~05171-0170~~

CHARTER NUMBER: 907152
ROLL AND FRAME: 5171-0170

OHIO SECRETARY OF STATE
PROCESSING STATEMENT
06/16/95

CORPORATION:

PRIMETIME HEALTH ASSOCIATES LTD.

DOCUMENT NUMBER

95060628601

CODE

LCA

FEE

85.00

120425

RETURN TO: REESE, PYLE, DRAKE & MEYER
ATTN A M KENNEDY
P O BOX 919
NEWARK OH 43058-0919

TOTAL : 85.00

0435

05171-0171



The State of Ohio

Bob Taft

Secretary of State

907152

Certificate

It is hereby certified that the Secretary of State of Ohio has custody of the Records of Incorporation and Miscellaneous

Filings; that said records show the filing and recording of: LCA

of:

PRIMETIME HEALTH ASSOCIATES LTD.

United States of America
State of Ohio
Office of the Secretary of State

Recorded on Roll 5171 at Frame 0172 of
the Records of Incorporation and Miscellaneous Filings.

Witness my hand and the seal of the Secretary of State at

Columbus, Ohio, this 6TH day of JUNE ,

A.D. 19 95 .



Bob Taft
Bob Taft
Secretary of State

05171-0172

Prescribed by
Bob Taft, Secretary of State
30 East Broad Street, 14th Floor
Columbus, Ohio 43266-0418
Form LCA (July 1994)

Approved fmk
Date 6-6-95
Fee \$85.00

9506062860/

ARTICLES OF ORGANIZATION

(Under Section 1705.04 of the Ohio Revised Code)
Limited Liability Company

The undersigned, desiring to form a limited liability company, under Chapter 1705 of the Ohio Revised Code, do hereby state the following:

FIRST: The name of said limited liability company shall be PRIMETIME HEALTH ASSOCIATES LTD.

(the name must include the words "limited liability company", "limited", "Ltd" or "Ltd.")

SECOND: This limited liability company shall exist for a period of TWENTY-FIVE YEARS.

THIRD: The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is:

157 Spring Valley Drive

(street or post office box)

Granville, Ohio

43023

(city, village or township)

(state)

(zip code)

☐ Please check this box if additional provisions are attached hereto

Provisions attached hereto are incorporated herein and made a part of these articles of organization.

05171-0173

FOURTH: To engage in all phases of the business of nursing education and continuing education for health professionals and to do, without limitation, all things necessary and incidental thereto.

IN WITNESS WHEREOF, we have hereunto subscribed our names, this 3rd day of June, 1995.

Signed: Victoria Wellington
Victoria B. Wellington

Signed: Mona Myers
Mona Myers

(If insufficient space for all signatures, please attach a separate sheet containing additional signatures)

INSTRUCTIONS

1. The fee for filing Articles of Organization for a limited liability company is \$85.00.
2. Articles will be returned unless accompanied by a written appointment of agent signed by all or a majority of the members of the limited liability company which must include a written acceptance of the appointment by the named agent.
3. A limited liability company must be formed by a minimum of two persons.
4. Any other provisions that are from the operating agreement or that are not inconsistent with applicable Ohio law and that the members elect to set out in the articles for the regulation of the affairs of the limited liability company may be attached.

[Ohio Revised Code Section 1705.04]

05171-0174

Prescribed by
Bob Taft, Secretary of State
30 East Broad Street, 14th Floor
Columbus, Ohio 43266-0418
Form LCO (July 1994)

ORIGINAL APPOINTMENT OF AGENT
(for limited liability company)

The undersigned, being at least a majority of the members of
PRIMETIME HEALTH ASSOCIATES LTD., hereby appoint
(name of limited liability company)

Victoria B. Wellington to be the agent
(name of agent)

upon whom any process, notice or demand required or permitted by statute to be served upon
the limited liability company may be served. The complete address of the agent is:

157 Spring Valley Drive

(street address)

Granville, OH 43023

(city, village or township) Note: P.O. Box addresses are not acceptable

Victoria Wellington
Victoria B. Wellington

Mona Myers
Mona Myers

(If insufficient space for all signatures, please attach a separate sheet containing additional signatures)

ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for PRIMETIME HEALTH ASSOCIATES
hereby acknowledges and accepts the appointment of agent for said limited liability company.

Victoria Wellington
Victoria B. Wellington

INSTRUCTIONS

1. Articles of organization must be accompanied by an original appointment of agent R.C. 1705.06(B).
2. The agent for a limited liability company must be an individual who is a resident of Ohio, an Ohio corporation, or a foreign corporation holding an Ohio license as a foreign corporation. R. C. 1705.06(A)
3. An original appointment of agent form must be signed by at least a majority of the members of the limited liability company. R.C. 1705.06(B)

05171-0175

LAW OFFICES
REESE, PYLE, DRAKE & MEYER
36 NORTH SECOND STREET
P.O. BOX 919
NEWARK, OHIO 43058-0919

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ROBERT H. FLORY 1904-1982
WILLIAM F. FITZGERALD 1948-1975

June 5, 1995

Bob Taft, Secretary of State
30 East Broad Street, 14th Floor
Columbus, Ohio 43266-0418

RE: Victoria Wellington, et al
Primetime Health Associates

Dear Mr. Taft,

Enclosed for filing is an Assignment, Articles of Organization, Original Appointment of Agent, and a check which represents the filing fee in the amount of \$95.00.

If you have any questions, please feel free to give me a call.

Very truly yours,

REESE, PYLE, DRAKE & MEYER

By


Ann M. Kennedy

AMK/ph
Enclosure