

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L10000120859
FILED 8:00 AM
November 22, 2010
Sec. Of State
alunt

Article I

The name of the Limited Liability Company is:

PAIN MEDICINE PHYSICIANS OF JACKSONVILLE, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

3604 UNIVERSITY BLVD. SOUTH
STE 301
JACKSONVILLE, FL. US 32207

The mailing address of the Limited Liability Company is:

5800 BEACH BLVD.
STE 202-161
JACKSONVILLE, FL. US 32207

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

SANJEEV KHANNA
5800 BEACH BLVD.
STE 203-161
JACKSONVILLE, FL. 32207

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

Registered Agent Signature: SANJEEV KHANNA

Article V

The name and address of managing members/managers are:

Title: PRES
PARVEEN KHANNA MD
5800 BEACH BLVD., STE 203-161
JACKSONVILLE, FL. 32207 US

Title: V.P.
SANJEEV KHANNA
5800 BEACH BLVD., STE 203-161
JACKSONVILLE, FL. 32207 US

Article VI

The effective date for this Limited Liability Company shall be:

11/22/2010

Signature of member or an authorized representative of a member

Signature: SANJEEV KHANNA

L10000120859
FILED 8:00 AM
November 22, 2010
Sec. Of State
alunt