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SECRETARY OF STATE
TALLAHASSEE FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: Coastal Vascular and Interventional, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark A. Bednar
Mark A. Bednar, P.A.
11 East Zaragoza Street, Post Office Drawer 13146
Pensacola, Florida 32591

For further information concerning this matter, please call:

Mark A. Bednar at (850) 435.1025

Enclosed is a check for the following amount: $160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION
OF
COASTAL VASCULAR AND INTERVENTIONAL, L.L.C.

ARTICLE I - NAME

The name of the limited liability company is Coastal Vascular and Interventional, L.L.C., ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:	Mailing Address:
5147 North Ninth Avenue	5147 North Ninth Avenue
Suite 318	Suite 318
Pensacola, Florida 32504	Pensacola, Florida 32504

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Stuart A. Harlin
5147 North Ninth Avenue, Suite 318
Pensacola, Florida 32504

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 as provided for in Chapter 608, F.S..

Stuart A. Harlin

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TALLAHASSEE FLORIDA

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

The Limited Liability Company is to be a manager-managed company. In accordance with the regulations of the company, the name and address of each Manager is as follows:

Title:	Name and Address:
MGR	Stuart A. Harlin 5147 North Ninth Avenue Suite 318 Pensacola, Florida 32504
MGR	Christopher J. Bosarge 5147 North Ninth Avenue Suite 318 Pensacola, Florida 32504
MGR	Aaron B. Montgomery 5147 North Ninth Avenue Suite 318 Pensacola, Florida 32504
MGR	Harry R. Cramer 5147 North Ninth Avenue Suite 318 Pensacola, Florida 32504
MGR	Christopher J. Lecroy 5147 North Ninth Avenue Suite 318 Pensacola, Florida 32504
MGR	T. Roland Reeves 5147 North Ninth Avenue Suite 318 Pensacola, Florida 32504
MGR	John A. Tucker 5147 North Ninth Avenue Suite 318 Pensacola, Florida 32504

The regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization.

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REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Stuart A. Harlin
Typed or printed name of signee

STATE OF FLORIDA

COUNTY OF ESCAMBIA

Sworn to and subscribed before me this 5 day of August, 2008 by Stuart A. Harlin, personally known to me or who provided Florida Driver's License as identification.

Notary Public

[Seal]

KIMBERLY CAIN
Notary Public - State of Florida
My Commission Expires Dec 7, 2011
Commission # DD 712272
Bonded Through National Notary Assn.

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