

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations
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From:

Account Name : ZACK KOSNITZKY, P.A.
Account Number : I19990000190
Phone : (305) 539-8400
Fax Number : (305) 357-8553

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LIMITED LIABILITY COMPANY**Oncology Network Enterprises, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION
of
ONCOLOGY NETWORK ENTERPRISES, LLC**

The undersigned initial member hereby forms a limited liability company under the laws of the State of Florida:

ARTICLE I. NAME

The name of the Limited Liability Company is: Oncology Network Enterprises, LLC.

ARTICLE II. ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:
1221 Brickell Avenue, Suite 917, Miami, Florida, 33131.

**ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, AND
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are: KTG&S Registered Agent Corporation, 100 S.E. 2 Street, Suite 2800, Miami, Florida, 33131-1714.

Keith J. Blum, Esq.
Zack Kosnitzky, P.A.
100 S.E. 2 Street, Suite 2800
Miami, Florida 33131-1714
Florida Bar Number: 0879185

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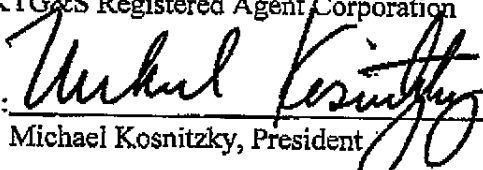
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Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. 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.

KTG&S Registered Agent Corporation

By:

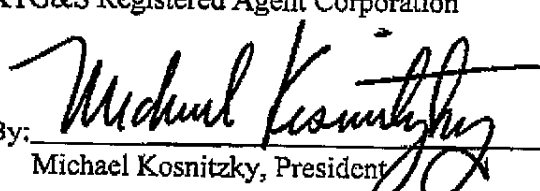

Michael Kosnitzky, President

IN WITNESS WHEREOF, the undersigned initial member has executed the foregoing Articles of Organization as of the 28th day of June, 2000.

AUTHORIZED AGENT:

KTG&S Registered Agent Corporation

By:


Michael Kosnitzky, President

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