Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : DUANE MORRIS & HECKSCHER, LLP

Account Number : I19990000059
Phone : (305)960-2220
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LIMITED LIABILITY COMPANY

INDIAN RIVER WALK IN CLINIC - SEBASTIAN, LLC

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Certificate of Status	0
Certified Copy	0
Page Count	02
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ARTICLES OF ORGANIZATION **OF** INDIAN RIVER WALK IN CLINIC - SEBASTIAN, LLC

These Articles of Organization are made for the purpose of organizing a Florida limited liability company under the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes (the "Act").

ARTICLE I: NAME

The name of this limited liability company is INDIAN RIVER WALK IN CLINIC -SEBASTIAN, LLC (the "Company").

ARTICLE II: DURATION

The Company shall have perpetual existence unless terminated as specified in Section 608,441 of the Act.

ARTICLE III: ADDRESS OF COMPANY

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

1000 36th Street Vero Beach, Florida 32960

ARTICLE IV: REGISTERED AGENT

The name and address of the registered agent of the Company is:

Carrol. Frischkorn 1000 36th Street Vero Beach, Florida 32960

ARTICLE V: MANAGEMENT OF THE COMPANY

The Company is to be a manager-managed company. The name and address of the initial manager is:

Carroll Frischkom 1000 36th Street Vero Beach, Florida 32960

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The undersigned has executed these Articles of Organization effective as of June ___ 2001.

Carrol Frischkom

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

ACCEPTANCE BY REGISTERED AGENT

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 complex 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.

Carrol Frischkorn

SECRETARY OF STATE ISION OF CORPORATION 2: 3:

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