ACCOUNT	NO.	:	072100000032
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REFERENCE :

\$ 125.00 COST LIMIT :

ORDER DATE: January 11, 2002

ORDER TIME: 11:22 AM

ORDER NO. : 675266-005

CUSTOMER NO: 7187578

Cynthia A. Mikos, Esq Cynthia A. Mikos, P.a. CUSTOMER:

205 N. Parsons Avenue

Brandon, FL 33510

DOMESTIC FILING

QUALITY HEALTH PLAN, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

900004769379--2

# ARTICLES OF ORGANIZATION OF QUALITY HEALTH PLAN, L.L.C.

a Florida Limited Liability Company

DE JIM I PM 1: 25

### ARTICLE I. NAME

The name of this Limited Liability Company is QUALITY HEALTH PLAN, L.L.C.

## ARTICLE II. ADDRESS

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

99 Royal Palm Circle Largo, FL 33778

### ARTICLE III. DURATION

This Limited Liability Company's existence shall commence upon the acceptance of the Articles of Organization by the Secretary of State of Florida and shall have perpetual duration.

### ARTICLE IV. MEMBERS

The Limited Liability Company shall at all times maintain at least one or more members. The name and address of the initial members are:

Arain Nawaz, M.D. 620 Belle Terre Rd. Port Jefferson, NY 11777

Haider Khan, M.D. 10806 US Hwy. 19, Ste. 102 Port Richey, FL 34668

#### ARTICLE V. MANAGEMENT

The Limited Liability Company is a member managed company.

# SECRETARY OF STEAM IN 25 ARTICLE VI. Registered Agent, Registered Office, and Registered Agent's Signature

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

Cynthia A. Mikos, Esq. Cynthia A. Mikos, P.A. 205 N. Parsons Ave., Suite A Brandon, FL 33510-4515

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.

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.

Meider Khan, M.D., Member