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P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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TALLAHASSEE, FLORIDA

FILED

1.) Center For Bone and Joint Disorders, LLC
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

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DIVISION OF CORPORATIONS
SECRETARY OF STATE

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SPECIAL INSTRUCTIONS

JB
1/29/02

ARTICLES OF ORGANIZATION
FOR LIMITED LIABILITY COMPANY

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, FS Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I.

NAME

The name of the Limited Liability Company is:

CENTER FOR BONE AND JOINT DISORDERS, LLC

ARTICLE II.

ADDRESS

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

2319 Castilla Isle
Ft. Lauderdale, FL 33301

ARTICLE III.

DURATION

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State or on another effective date if specified. The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV.

REGISTERED OFFICE AND AGENT

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

ROBERT R. BROWN
2319 Castilla Isle
Ft. Lauderdale, FL 33301

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ARTICLE V.

MANAGEMENT

The company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the company. These 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. The name and address of the initial manager of the company is:

ROBERT R. BROWN
2319 Castilla Isle
Ft. Lauderdale, FL 33301

ARTICLE VI.

MEMBERS' S RIGHTS TO CONTINUE BUSINESS


The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event, which terminates the continued membership of a member in the limited liability company shall be:

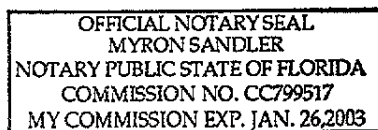
The members shall have the right to do so.

IN WITNESS WHEREOF, the undersigned organizers have made and subscribed these Articles of Organization at Hollywood, Florida, on this 21 day of JANUARY, 2002.


ROBERT R. BROWN

SWORN TO AND SUBSCRIBED before me on the 21 day of JANUARY, 2002, who is personally known to me.


NOTARY PUBLIC
My Commission Expires:



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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

CENTER FOR BONE AND JOINT DISORDERS, LLC

2. The name and address of the registered agent and office is: (P.O. Box not acceptable):

ROBERT R. BROWN
2319 Castilla Isle
Ft. Lauderdale, FL 33301

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.

Robert R. Brown
(Signature) ROBERT R. BROWN

January 21, 2002
(Date)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
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