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Division of Corporations Public Access System Kutherine Herrie, Secretary of State

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To:

Division of Corporations

: (850)205-0383 Fax Number

From:

Account Name : EMPIRE CORFORATE KIT COMPANY

Account Number : 072450003255 : (305)634-3694 Phone

: (305)633-9696 Fax Number

LIMITED LIABILITY COMPANY

MEDICAL CREDIT, LLC

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ARTICLES OF ORGANIZATION MEDICAL CREDIT, LLC A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Statutes)

Article 1. Name. The name of the limited liability company is MEDICAL CREDIT, LLC.

Article 2. Purpose. The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.

Article 3. Address of Principal Office. The street address of the principal office of the limited liability company is: 5740 S.W. 84th Street, Miami, Florida 33143.

Article 4. Mailing Address. The mailing address of the limited liability company is: 5740 S.W. 84th Street, Miami, Florida 33143.

Article 5. Period of Duration. The period of duration shall be perpetual.

Article 6. Management. The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

Article 7. Registered Agent, Registered Office, and Registered Agents Signature. The name and the Florida Street address of the registered agent are: Cristina Maria Pinet, 5740 S.W. 84th Street, Miami, Florida 33143.

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 provisional 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.

Cristina Maria Pinet

Cristina Maria Pinet

Article 8. Effective Date. The effective date of the limited liability company shall be: Cristina Maria Pinet, Member date of filing.

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

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