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1300 NORTH FEDERAL HIGHWAY, SUITE 107

BOCA RATON, FLORIDA 33432

FLORIDA & NEW YORK BARS

561 - 394 - 2321

March 4, 2002

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Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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MJM

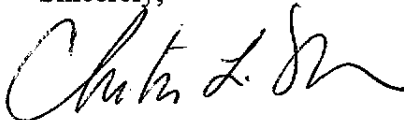
Re: Filing for: MEDICAL DISCOUNTS USA, LLC.

Dear Sir or Madam:

Enclosed please find our check for \$125.00 for filing fees and original Articles of Organization for the above referenced Limited Liability Company. Please file and return in the self-addressed stamped envelope prepared.

Thank you for your cooperation in this matter. In the event of any questions or comments, please call.

Sincerely,



Christina Noren
Legal Assistant

/cln
02-940/secyst
Enclosures

FILED
02 MAR -7 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
FOR
MEDICAL DISCOUNTS USA, LLC
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is : MEDICAL DISCOUNTS USA, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
2412 NW 62nd Street, Boca Raton, Florida 33496

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Ira S. Salk
2412 NW 62nd Street
Boca Raton, FL 33496

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.

Registered Agent's Signature

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be perpetual.

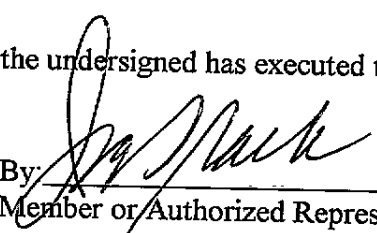
ARTICLE IV - Management:

The Limited Liability Company is to be managed by a Manager and the name and address of each Manager who is to serve as Manager is:

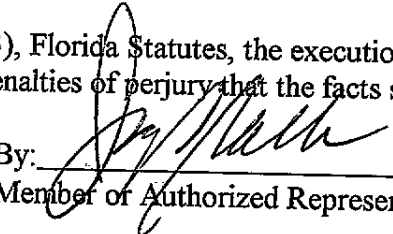
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization
on this 4th day of March, 2002.

By: 
Member or Authorized Representative of Member

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.

By: 
Member or Authorized Representative of Member