

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L02000007259
FILED
March 27, 2002
Sec. Of State**

Article I

The name of the Limited Liability Company is:

PALM BEACH ANESTHESIA & PAIN MANAGEMENT CONSULTANTS,
LLC

Article II

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

12983 SOUTHERN BOULEVARD
SUITE # 202
LOXAHATCHEE, FL. US 33470

The mailing address of the Limited Liability Company is:

12983 SOUTHERN BLVD.
SUITE # 202
LOXAHATCHEE, FL. US 33470

Article III

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

KRISHNA TRIPURANENI
12983 SOUTHERN BOULEVARD
SUITE 202
LOXAHATCHEE, FL. US 33470

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.

Registered Agent Signature: KRISHNA TRIPURANENI

Article IV

The Limited Liability Company is a manager managed company

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Article V

The name and address of members/managers are:

Title: MGR
KRISHNA TRIPURANENI
12983 SOUTHERN BLVD. STE # 202
LOHAHATCHEE, FL. US 33470

Signature of member or an authorized representative of a member

Signature: KRISHNA TRIPURANENI