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FILED
2002 MAY 20 AM 8:38
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

May 13, 2002

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

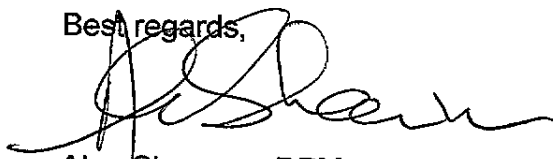
Dear Sir or Madam,

Enclosed are the Articles of Organization along with a check in the amount of \$155.00 as payment for the Filing Fee (\$100), Designation of Registered Agent (\$25) and for a Certified Copy (\$30), to register **Future Medical Solutions, LLC** as a limited liability company under the laws of the State of Florida. If there are any questions please contact the undersigned at:

5210 Linton Blvd., #305
Delray Beach, FL 33484
561 4989888

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***155.00 ***155.00

Best regards,



Alan Sherman, DPM

JBRYAN MAY 28 2002

ARTICLES OF ORGANIZATION OF FUTURE MEDICAL SOLUTIONS, LLC

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The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is: Future Medical Solutions, LLC

ARTICLE II — Address:

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

5210 Linton Blvd., #305
Delray Beach, Florida 33484

ARTICLE III — Duration:

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

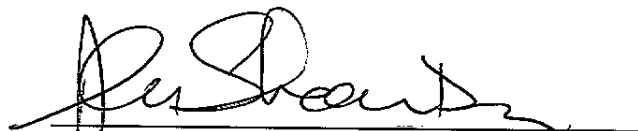
ARTICLE IV — Management:

The Limited Liability Company will be a manager-managed company.

ARTICLE V — Registered Agent:

The name and address of the registered agent for service of process in the state shall be:

Alan Sherman, D.P.M.
5210 Linton Blvd., #305
Delray Beach, Florida 33484


Alan Sherman, CEO of Future Medical
Solutions, LLC

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:

Future Medical Solutions, LLC

2. The name and address of the registered agent and office is:

Alan Sherman, D.P.M.
5210 Linton Blvd., #305
Delray Beach, Florida 33484

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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, the undersigned hereby accepts the appointment as registered agent and agree to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and the undersigned is am familiar with and accept the obligations of its position as registered agent.

Alan Sherman, D.P.M.

By: 

Dated: May 13, 2002