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To:

Division of Corporations

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From:

Account Name : GRIMES, GOEBEL, GRIMES & HAWKINS, P.A.

Account Number : 072460000742 Phone : (941)748-0151

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LIMITED LIABILITY COMPANY

West Dade Pediatrics, P.L.

Certificate of Status	0
Certified Copy	0
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12/6/2002

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ARTICLES OF ORGANIZATION OF WEST DADE PEDIATRICS, P.L. a Professional Limited Liability Company

ARTICLE I

Name

The name of the professional limited liability company ("Company") is W DADE PEDIATRICS, P.L.

ARTICLE II Address

AMORE SILVERATIONS The street address of the Company's principal office is 7100 W. 20th Ave., #608, Hialeah, Florida 33016. The mailing address of the Company's principal office is 7100 W. 20th Ave., #608, Hialeah, Florida 33016.

ARTICLE III Registered Agent and Office

The name of the Company's initial registered agent in Florida is John E. Egusquiza. The address of the Company's registered agent is 9130 S. Dadeland Blvd., Suite 1209, Miami, Florida 33156.

ARTICLE IV

Professional Limited Liability Company

This limited liability company shall be a professional limited liability company under Florida Statutes chapter 621. The business of the company is limited to the one profession of medicine and no person or entity shall be admitted as a member unless he, she, or it is qualified to practice medicine. Further, no interest in this limited liability company can be sold or transferred except to someone so qualified.

WITNESS WHEREOF, I have executed these Articles of Organization on this

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED PROFESSIONAL LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE OF FLORIDA.

- 1. The name of the Professional Limited Liability Company is WEST DADE PEDIATRICS, P.L.
- 2. The name and the Florida street address of the registered agent and office are: John E. Egusquiza, Esquire, 9130 S. Dadeland Blvd., Suite 1209, Miami, Florida 33156.

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, Florida Statutes.

Pated: \mathcal{L} , \mathcal{L} , 2002

U:\Brenden\Corporate\West Dade Pediatries, LLC\Articles of Organization.wpd\slh\November 27, 2002