

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

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FILED 8:00 AM  
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Sec. Of State

**Article I**

The name of the Limited Liability Company is:

SOUTH FLORIDA RECOVERY OF MEDICAL BILLING, LLC

**Article II**

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

1148 NE 48 ST  
POMPANO BEACH, FL. 33064

The mailing address of the Limited Liability Company is:

1148 NE 48 ST  
POMPANO BEACH, FL. 33064

**Article III**

The purpose for which this Limited Liability Company is organized is:

MEDICAL BILLING COLLECTIONS.

**Article IV**

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

KAMEL I SALAMEH  
1148 NE 48 ST  
POMPANO BEACH, FL. 33064

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: KAMEL SALAMEH

Signature of member or an authorized representative of a member

Signature: TAMER SALEMEH