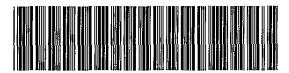
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## CAPITAL CONNECTION, INC.

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		Art. of Amend. File
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		Dissolution / Withdrawal
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY C ARTICLE I - NAME: The Name of the Limited liability Company is: PATIENT PRACTITIONERS, ARTICLE II - ADDRESS The mailing address and street address of the principal office of the Limited Liability Company Mailing Address: Principal Office Address: 1165 State Park Road 1165 State Park Road Chipley, Florida 32428 Chipley, Florida 32428 ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the Registered Agent are: Roy Lake, Esquire 1314 Jackson Avenue Chipley, Florida 32428

Having been named as the 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 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 IV - MANAGER(S) AND/OR MANAGING MEMBERS
The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Naomi Melvin
	1165 State Park Road
	Chipley, Florida 32428
_MGRM	Doug Courtney
	21 Prince Kaarel Lane
	Palm Coast, Florida 32164
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Attach additional sheet if necessary	
NOTE: an additional article must be added if a	n effective date is requested.
REQUIRED SIGNATURE:	
Signature of Member or an Authorized	٠
Representative of a Member	
(In accordance with section 608.408(3), Florida Statutes, the penalties of perjury that the facts stated herein are true.)	he execution of this document constitutes an affirmation under
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Typed or Printed Name of Signee