Florida Department of State

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Division of Corporations

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From:

Account Name : CORPORATE & CRIMINAL RESEARCH SERVICES

Account Number : 110450000714 Phone : (850)222-1173 Fax Number : (850)224-1640

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LIMITED LIABILITY COMPANY

AMERICAN DOCTORS NETWORK, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF ORGANIZATION AMERICAN DOCTORS NETWORK, LLC

ARTICLE I Name

The name of the Limited Liability Company is AMERICAN DOCTORS NETWORK, LLC (the "Company").

ARTICLE II Address

The mailing address and street address of the principal office of the Company is 2300 Corporate Boulevard NW, Suite 214, Boca Raton, Florida 33431.

ARTICLE III Duration

The period of duration for the Company shall be perpetual.

ARTICLE IV Management

The Company is to be managed by the members and the name and address of the initial managing member is:

> Adam Cohen 2300 Corporate Boulevard NW Suite 214 Boca Raton, Florida 33431

ARTICLE V Admission of Additional Members

Members shall have the right to admit additional members as provided by the Florida Limited Liability Company Act by a vote of a majority-in-interest of the members.

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ARTICLE VI Members' Rights to Continue Business

The death, retirement, resignation, expulsion, dissolution, bankruptcy, dissociation or withdrawal of any member, or the occurrence of any other event that terminates the continued membership of any member shall not cause the Company to be dissolved or its affairs to be wound-up, and upon the occurrence of any such event, the Company shall be continued without dissolution and without any affirmative action or requirement on the part of the members.

MEMBER:

DAM COHEN

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.407 OR 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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: AMERICAN DOCTORS NETWORK, LLC
- 2. The address of the registered agent and office is: Adam Cohen, 2300 Corporate Boulevard NW, Suite 214, Boca Raton, Florida 33431.

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.

ADAM COHEN

SECRETARY OF STATE
TALLAHASSEE FLOORS