

FROM : GASSMAN

FAX NO. : 7274435829

Jan. 26 2005 05:04 PM

Division of Corporations

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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : GASSMAN & ASSOCIATES, P.A.  
Account Number : 075350000514  
Phone : (727) 442-1200  
Fax Number : (727) 443-5829

**LIMITED LIABILITY COMPANY**  
**PROFESSIONAL ANESTHESIA SOLUTIONS, L.L.C.**

Certificate of Status	0
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2005 JAN 26 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is: **PROFESSIONAL ANESTHESIA SOLUTIONS, L.L.C.**

**ARTICLE II - Effective Date:**

The effective date of the filing of these Articles of Organization shall be: **February 1, 2005**

**ARTICLE III - Address:**

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

**117 10th Street, E., Tierra Verde, FL 33715**

**ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

**Alan S. Gassman**

Name

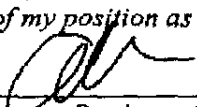
**1245 Court Street, Suite 102**

Florida street address (P.O. Box NOT acceptable)

**Clearwater, FL 33756**

City, State, and Zip

*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, F.S.*

  
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

**Signature of a member or an authorized representative of a member**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

  
**ALAN S. GASSMAN**

J:\K\Knop, Christopher & Linda\Professional Anesthesia Solutions, L.L.C\Articles of Organization, L.wpd  
jas 1-26-05

**ARTICLES OF ORGANIZATION OF TOMELLE, L.L.C.**

**PAGE 1**

Alan S. Gassman, Esquire  
1245 Court Street Suite 102  
Clearwater, FL 33756  
(727) 442-1200  
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