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(Business Entity Name)

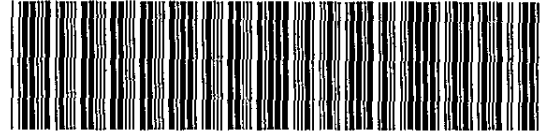
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAR 21 2005

*Alexander, Shorstein & Lee, LLC*  
*Attorneys at Law*

19 Old Mission Avenue  
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J. Stephen Alexander, Esquire  
Bryan Shorstein, Esquire  
Sung H. Lee, Esquire

March 15, 2005

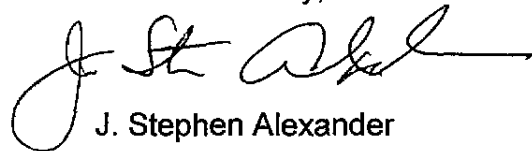
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

TO WHOM IT MAY CONCERN:

Enclosed please find the original Articles of Organization for **American Electronic Medical Records, LLC** and **American Medical Records, LLC**, and our check for filing fees in the amount of three hundred twenty dollars and zero cents (\$ 320.00).

Please file the articles and forward the certificate of incorporation along with certified copies to our office at **19 Old Mission Avenue, St. Augustine, Florida 32084**. Thank you for your kind attention to this matter.

Sincerely,



J. Stephen Alexander

JSA/tea

enclosures

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TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I

The name of the Limited Liability Company is:

**American Electronic Medical Records, LLC**

## ARTICLE II

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

103 Anastasia Boulevard  
St. Augustine, Florida 32080

The mailing address of the Limited Liability Company is:

103 Anastasia Boulevard  
St. Augustine, Florida 32080

## ARTICLE III

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

ANY AND ALL LAWFUL BUSINESS INCLUDING DISTRIBUTION OF  
SOFTWARE AND HARDWARE AND SALES AND SERVICE CONTRACTS WITH  
MEDICAL DOCTORS AND DENTISTS

## ARTICLE IV

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

J. STEPHEN ALEXANDER, ESQUIRE  
19 Old Mission Avenue  
St. Augustine, Florida 32084

*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 relation 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

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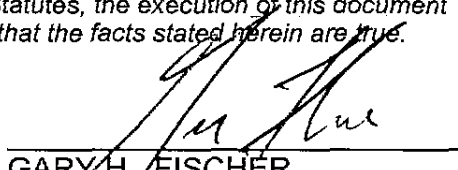
## ARTICLE V

The name and address of the managing members/managers are:

Title: President/ Managing Member  
Name: GARY H. FISCHER  
Address: 103 Anastasia Boulevard  
St. Augustine, Florida 32080

Title: Vice-President/ Managing Member  
Name: MARY P. FISCHER  
Address: 103 Anastasia Boulevard  
St. Augustine, Florida 32080

*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.*

  
\_\_\_\_\_  
GARY H. FISCHER  
Signature of a Member

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