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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 344390 6099A

AUTHORIZATION :

Patricia Pajaro

COST LIMIT : \$ 125.00

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05 MAY -2 AM 10:38
SECK TARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 29, 2005

ORDER TIME : 9:54 AM

ORDER NO. : 344390-005

CUSTOMER NO: 6099A

CUSTOMER: Mr. Thomas Welsh
Moyle Flanigan Katz Raymond &
Sheehan, P.a.
P.o. Box 3888

West Palm Beach, FL 33402-3888

DOMESTIC FILING

NAME: NOAH D. SABIN, M.D., LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 29, 2005

AMANDA HADDAN
CSC
TALLAHASSEE, FL

SUBJECT: NOAH D. SABIN, M.D., LLC
Ref. Number: W05000021821

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05 MAY -2 AM 10:38
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TALLAHASSEE, FLORIDA
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for NOAH D. SABIN, M.D., LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The articles must include a statement of the specific professional practice (e.g. "medicine") in which the company will engage.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 205A00030125

RESUBMIT

**ARTICLES OF ORGANIZATION
OF
NOAH D. SABIN, M.D., LLC**

FILED
05 MAY -2 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby forms and establishes a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company is Noah D. Sabin, M.D., LLC ("Company").

ARTICLE II

This limited liability company shall have perpetual existence from the date of filing these Articles with the Department of State unless sooner terminated by law. This limited liability company is organized to A) provide medical consulting services B) For the purpose of transacting any or all lawful business and C) to do any and everything pertinent to the above.

ARTICLE III

The mailing address and street address of the principal place of business of the Company is 11184 Marina Bay Road, Wellington, FL 33467. The Company may at its discretion, at any time, change the address of its principal place of business.

ARTICLE IV

The name and street address of the initial registered agent of this Company Martin V. Katz, 625 N. Flagler Drive, 9th Floor, West Palm Beach, FL 33401.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 28th day of April, 2005.

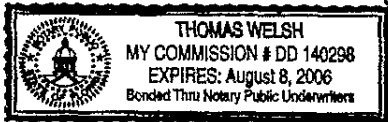
AUTHORIZED REPRESENTATIVE OF
MEMBER



MARTIN V. KATZ

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 28th day of APRIL, 2005, by Martin V. Katz, who is personally known to me, OR has produced as identification.



(NOTARY STAMP)

Thomas Welsh
Notary Name: Thomas Welsh
Notary Public

I am familiar with and hereby acknowledge and accept the obligations of the Registered Agent for Noah D. Sabin, M.D., LLC.

Martin V. Katz
Registered Agent