

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L05000066142  
FILED 8:00 AM  
July 05, 2005  
Sec. Of State  
jsadler

**Article I**

The name of the Limited Liability Company is:  
OSTEOPATHIC MEDICAL EDUCATION LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
901 PONCE DE LEON BOULEVARD  
SUITE 401  
CORAL GABLES, FL. 33134

The mailing address of the Limited Liability Company is:  
901 PONCE DE LEON BOULEVARD  
SUITE 401  
CORAL GABLES, FL. 33134

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
DAVID R BLACK ESQ.  
1200 BRICKELL AVENUE  
SUITE 750  
MIAMI, FL. 33131

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.

Registered Agent Signature: DAVID R. BLACK

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
YIFE TIEN  
901 PONCE DE LEON BOULEVARD, SUITE 401  
CORAL GABLES, FL. 33134

Title: MGRM  
DAVID R BLACK ESQ.  
1200 BRICKELL AVENUE, SUITE 750  
MIAMI, FL. 33131

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### **Article VI**

The effective date for this Limited Liability Company shall be:

07/05/2005

Signature of member or an authorized representative of a member

Signature: DAVID R. BLACK