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(Requestor's Name)

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(City/State/Zip/Phone #)

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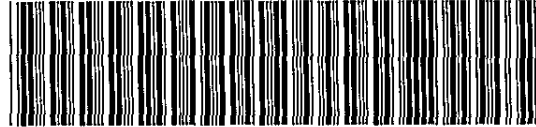
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch SEP 30 2005

FF \$125  
cc 30

# HUTCHISON, MAMELE & COOVER, P.A.

ATTORNEYS AND COUNSELORS AT LAW

WILLIAM C. HUTCHISON, JR. (1928-1991)  
\* RICHARD L. MAMELE  
STEPHEN H. COOVER  
  
\* BOARD CERTIFIED  
MARITAL & FAMILY LAW

PARK-FULTON BUILDING, 230 NORTH PARK AVENUE  
POST OFFICE BOX 1149

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FAX (407) 330-0966

September 23, 2005

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

Re: Filing of Articles of Organization

Ladies/Gentlemen:

Attached please find **original** signed and notarized Articles of Organization for the following limited liability companies:

Bishnu Verma, M.D.  
Verma LLB, LLC

Rajendra Hippalgaonkar, M.D.  
Hippalgaonkar LBB, LLC

Neeraj Sharma, M.D.  
Mid-Florida LBB, LLC

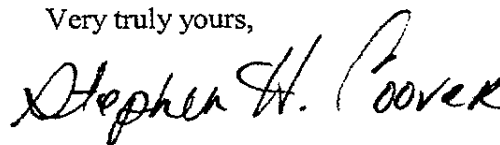
Ram Amilineni, M.D.  
Amilineni LBB, LLC

Pradeep Mathur, M.D.  
Mathur LBB, LLC

Please also find my firm's trust account check in the sum of \$775.00. Please file and return a certified copy of the Articles to the undersigned.

Should you have any questions, please feel free to call.

Very truly yours,

A handwritten signature in black ink that reads "Stephen H. Coover". The signature is written in a cursive style with a large, looped "C" at the end.

Stephen H. Coover

SHC/bmt  
Enclosures

ARTICLES OF ORGANIZATION  
OF  
MID-FLORIDA LBB, LLC

FILED  
05 SEP 28 PM 12:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the limited liability company is *MID-FLORIDA LBB, LLC*

ARTICLE II - ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is 1061 Medical Center Drive, Suite 110, Orange City, FL 32763.

ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:

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

NEERAJ SHARMA, M.D.  
1061 Medical Center Drive, Suite 110  
Orange City, FL 32763

*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 property and complete performance of my duties, and I am familiar with, and accepts the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

  
\_\_\_\_\_  
Registered Agent's Signature

ARTICLE IV - EFFECTIVE DATE

The duration of the Limited Liability Company shall, unless limited by the terms of any Regulations Agreement, be perpetual.

ARTICLE V - MEMBER(S):

The name and address of each Member is as follows:

Title:

Name and Address:

Member

Gregory L. Ortega  
803 Westove Place  
Sanford, FL 32771

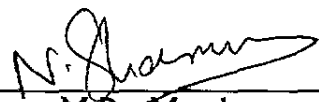
Member

Rene Cabeza  
719 Treeline Place  
Sanford, FL 32771

Member

Neeraj Sharma  
1848 Redwood Grove Terrace  
Lake Mary, FL 32746

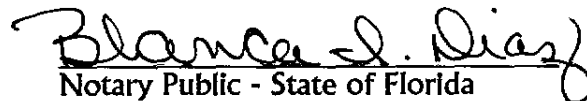
IN WITNESS WHEREOF, the undersigned, as a member, has executed the foregoing Articles of Organization on the 22nd day of September, 2005.


  
\_\_\_\_\_  
Neeraj Sharma, M.D., 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.)

STATE OF FLORIDA  
COUNTY OF Volusia

The foregoing instrument was acknowledged before me this 22 day of September, 2005 by Neeraj Sharma, M.D., who is [☒] personally known to me OR [☐] not personally known to me and has produced a valid Florida driver's license as identification.

  
\_\_\_\_\_  
Notary Public - State of Florida

NOTARY PUBLIC-STATE OF FLORIDA  
 Blanca I. Diaz  
Commission # DD460028  
Expires: SEP 17, 2009  
Bonded Thru Atlantic Bonding Co., Inc.

My Commission Expires: Sept. 17, 2009