Electronic Articles of Organization
For
Florida Limited Liability Company

L06000001565
FILED 8:00 AM
January 05, 2006
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:

JOEL L. SEBASTIEN, M.D., P.L.

Article II

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

10 LAUREL RIDGE BREAK
ORMOND BEACH, FL. US 32174

The mailing address of the Limited Liability Company is:

10 LAUREL RIDGE BREAK
ORMOND BEACH, FL. US 32174

Article III

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

GENERAL SURGERY.

Article IV

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

JOEL L SEBASTIEN
10 LAUREL RIDGE BREAK
ORMOND BEACH, FL. 32174

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: JOEL L. SEBASTIEN, M.D.

Article V

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The name and address of managing members/managers are:

Title: MGRM
JOEL L SEBASTIEN
10 LAUREL RIDGE BREAK
ORMOND BEACH, FL. 32174 US

Signature of member or an authorized representative of a member

Signature: JOEL L. SEBASTIEN, M.D.