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(Business Entity Name)

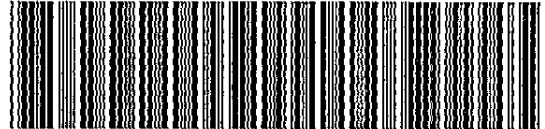
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EFFECTIVE DATE

1/6/06

01/10/06--01004--019 **160.00

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TALLAHASSEE, FLORIDA

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N. Culligan FEB 14 2006

DEVITO & COLEN, P.A.
ATTORNEYS AT LAW

DEVITO AND COLEN, P.A.

GERALD R. COLEN

Of Counsel

JAMES A. DEVITO

7243 BRYAN DAIRY ROAD • LARGO, FLORIDA 33777

TELEPHONE (727) 545-8114

TELEFAX (727) 545-8227

January 5, 2006

Department of State
Division of Corporations
Corporate Records Bureau
P. O. Box 6327
Tallahassee, FL 32301

RE: Articles Of Organization of
Family Medical Care of St. Petersburg, P.L.

Gentlemen:

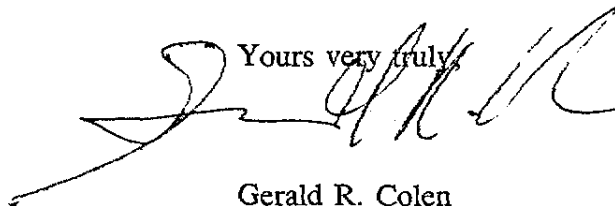
Pursuant to your instructions, enclosed please find the following:

1. Original and one copy of the Articles of Organization of FAMILY MEDICAL CARE OF ST. PETERSBURG, P.L.;
2. Check made payable to Department of State in the sum of \$160.00 to cover the following:

\$100.00	Filing Fee (Professional Limited Liability Company)
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified copy of Articles
<u>\$ 5.00</u>	Certificate of Status
\$160.00	

Please file the original of the enclosed documents and return a certified copy to the undersigned.

Yours very truly,



Gerald R. Colen

GRC/mpj
Enclosures

cc: Dr. Cesar E. Jordan
Dr. Yves Morency
Dr. Chitra Ravindra

(05-445)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2006

GERALD R. COLEN
DEVITO & COLEN, P.A.
4243 BRYAN DAIRY ROAD
LARGO, FL 33777

SUBJECT: FAMILY MEDICAL CARE OF ST. PETERSBURG, P.L.
Ref. Number: W06000001441

We have received your document for FAMILY MEDICAL CARE OF ST. PETERSBURG, P.L. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 10, 2005. Please amend your document accordingly.

The specific purpose of the entity must be set forth in the document.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 006A00002532

EFFECTIVE DATE

1-6-06

**ARTICLES OF ORGANIZATION
OF
FAMILY MEDICAL CARE OF ST. PETERSBURG, P.L.**

Pursuant to Chapters 621 and 608, Florida Statutes, as same may be amended from time to time, the undersigned do hereby establish a professional limited liability company, pursuant to the terms of these Articles of Organization as set forth herein below:

I. NAME OF PROFESSIONAL LIMITED LIABILITY COMPANY

The Name of this Professional Limited Liability Company shall be FAMILY MEDICAL CARE OF ST. PETERSBURG, P.L.

II. MAILING ADDRESS AND PRINCIPAL PLACE OF BUSINESS

The street address and also the principal place of business for this professional limited liability company shall be 3745 - 33rd Street North, St. Petersburg, Florida 33713.

III. NAME AND ADDRESS OF REGISTERED AGENT

The name and street address of the initial registered agent for service of process is as follows:

Tara Ives
3745 - 33rd Street North
St. Petersburg, Florida 33713

IV. STATEMENT OF MEMBER-MANAGEMENT

The Member-Managers of the Limited Liability Company shall be

Dr. Caesar Jordan
3745 - 33rd Street North
St. Petersburg, Florida 33713

Dr. Yves Morency
3745 - 33rd Street North
St. Petersburg, Florida 33713

Dr. Chitra Ravindra
3745 - 33rd Street North
St. Petersburg, Florida 33713

Each Member-Manager shall have an equal voting interest with all other member-managers.

V. PURPOSE OF PROFESSIONAL LIMITED LIABILITY COMPANY

The purpose of this limited liability company is to ^{operate a medical practice and to} perform any and all duties lawfully permitted by these Articles of Organization and by the United States of America, and by the State of Florida, pursuant to Chapters 621 and 608 Florida Statutes. Additionally, the purpose of this company is to own, hold and possess, and when in the interests of this company, to lease real and

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personal property anywhere in the State of Florida in accordance with the laws of that State. If appropriate, this professional limited liability company shall be entitled to become authorized or permitted to conduct business operations in any state of the United States of America.

VI. POWERS

This professional limited liability company shall have all of the powers that are set forth in Chapters 621 and 608 Florida Statutes as same may be amended from time to time. Additionally, the company shall have the requisite powers needed to own, hold and possess real and personal property in the state of Florida. Provided however, that any manager and/or any member and/or any member-manager shall not have any personal liability or obligation to any other member or to any creditor including any judgment creditor by reason of the execution of this document or by reason of the exercise of any of the powers provided for herein or provided in Chapters 621 and 608 Florida Statutes except as otherwise specifically provided in these two statutes. No personal liability that may exist or that may accrue with regard to any member or member-manager shall attach to any property owned by this limited liability company.

VII. LIABILITY OF MEMBERS, MANAGERS

Members, and member-managers of this professional limited liability company, shall not have nor shall they suffer any loss or damage or any liability for any action or cause of action permitted or occasioned by the actions or activities of this company, except as same may be specifically provided in Chapters 621 and 608 Florida Statutes.

VIII. AUTHORIZED REPRESENTATIVE

The authorized representative of this professional limited liability company is Tara Ives, in care of the address that is as provided in Article III, hereinabove. Provided however, that the acts or actions of the authorized representative shall not subject any non-acting member or other party of or to this professional limited liability company, if any there be, to any joint and several liabilities for any reason whatsoever.

IX. NO JOINT AND SEVERAL LIABILITY

Except as may be specifically provided by Chapters 621 or 608 Florida Statutes, No person named in these articles either individually or jointly as a member or as a member-manager or as an authorized representative or as the registered agent shall have any joint and several liability or liabilities for any of the acts or actions of this company or the acts or actions of any other person named herein. No person who may become a member or a member-manager or who may be appointed at some later date pursuant to the provisions of this document or pursuant to Chapters 621 and 608 Florida Statutes as manager, authorized representative or as registered agent shall have any joint and several liability or liabilities for any acts or actions of this professional limited liability company or the acts or actions of any other person named herein. No property, including any real property, tangible property or intangible property of whatsoever kind, nature and description and no matter where situated be it in the State of Florida or any other State of the United States, which may be owned individually or as a joint tenant with right of survivorship or as a tenancy in common or as an estate by the entireties by any member, member-manager, authorized representative or registered agent shall be subject to any action, cause of action, liability, loss or damage by reason of the acts or actions of any other member, authorized representative or registered agent.

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TALLAHASSEE, FLORIDA

X. EFFECTIVE DATE

The effective date of this Professional Limited Liability Company shall be January 6, 2006.
~~December 31, 2005.~~

IN WITNESS WHEREOF, THE UNDERSIGNED have executed this document on this the
21ST day of December, 2005

FAMILY MEDICARE CARE OF ST. PETERSBURG, P.L.

By: Caesar Jordan
Caesar Jordan

By: Yves Morency
Yves Morency

By: Chitra Ravindra
Chitra Ravindra

ACCEPTANCE AND CERTIFICATION BY REGISTERED AGENT

Pursuant to Chapter 608.415(2) F.S. the undersigned, having been appointed as registered agent for service of process by those Articles of Organization hereby states that he has accepted his appointment as registered agent simultaneously with being appointed. The undersigned states that he is familiar with and accepts the obligations of the position of registered agent as provided for in Chapter 608 F.S.

Gina A. Miller
Gina A. Miller, Registered Agent

BEFORE ME, the undersigned notary public for the state of Florida, personally appeared FAMILY MEDICAL CARE OF ST. PETERSBURG, PL., by CAESAR JORDAN, M.D., YVES MORENCY, MD. AND CHITRA RAVINDRA, M.D. well known to me, and they under oath testified that the above and foregoing document was their true act and deed. Dated this 21ST day of Dec, 2005.

Gerald R. Colon
Notary Public



Gerald R. Colon
My Commission D0271290
Expires March 26, 2008

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TALLAHASSEE, FLORIDA

CONSENT TO USE OF SIMILAR CORPORATE NAME

THE UNDERSIGNED, FAMILY MEDICAL CARE OF ST. PETERSBURG, INC.,
BY ITS OFFICER AND DIRECTOR CESAR JORDAN, HEREBY
AUTHORIZES, CONSENTS AND AGREES THAT THE NAME FAMILY
MEDICAL CARE OF ST. PETERSBURG, P.L. MAY BE OBTAINED AND
USED FOR ALL LEGAL PURPOSES BY THE STOCKHOLDERS, OFFICERS
AND DIRECTORS OF SAID PROFESSIONAL ASSOCIATION.

FAMILY MEDICAL CARE OF ST. PETERSBURG, INC.


BY: CESAR JORDAN, PRESIDENT

BEFORE ME, THE UNDERSIGNED NOTARY PUBLIC, PERSONALLY
APPEARED CESAR JORDAN, TO ME PERSONALLY KNOWN OR WHO
PRODUCED THE FOLLOWING IDENTIFICATION: _____
AND HE, UNDER OATH, STATED THAT THE ABOVE AND FOREGOING
CONSENT TO USE OF SIMILAR CORPORATE NAME WAS THE TRUE ACT
AND DEED OF FAMILY MEDICAL CARE OF ST. PETERSBURG, INC.


NOTARY PUBLIC

MY COMMISSION EXPIRES:



Gerald R. Cohen
My Commission DD271280
Expires March 26, 2008

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TALLAHASSEE, FLORIDA