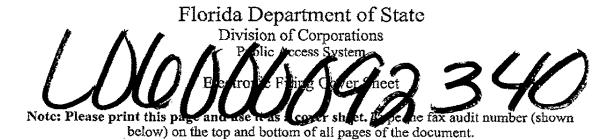
Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : COCHRANE & CO., P.A.

Account Number : 12004000001 : (561)684-9566 Phone Fax Number : (561)687-3528

FLORIDA/FOREIGN LIMITED LIABILITY CO.

STUART M. GRAHAM, JR., M.D., P.L.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION OF STUART M. GRAHAM, JR., P.L.

<u>ARTICLE 1 - NAME</u>

The name of the professional limited company is "STUART M. GRAHAM, JR., M.D., P.L."

ARTICLE II - PURPOSE

The business to be carried on is the professional practice of medicine. Each member must be a medical doctor licensed to practice medicine in the State of Florida.

ARTICLE III - DURATION

The professional limited company shall exist from the date of the filing of the Articles of Organization with the Department of State until the professional limited company is dissolved accordance with the Operating Agreement.

ARTICLE IV - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the professional limited company is:

2801 Exchange Court West Palm Beach, FL 33409

ARTICLE V - REGISTERED AGENT

The name and address of the initial registered agent of the professional limited company is:

Thomas E. Cochrane, Jr. 2801 Exchange Court West Palm Beach, FL 33409

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Cochrane And Co

ARTICLE VI - MANAGEMENT

The professional limited company shall be managed by one or more managers that shall be appointed by the members of the professional limited company as provided in its Operating Agreement. The following is the name and address of the initial manager and member of the professional limited company:

> Stuart M. Graham, Jr., M.D. 257 South Beach Road Hobe Sound, FL 33455

IN WITNESS WHEREOF, the undersigned member has executed these Articles of Organization this 20th day of September, 2006.

STATE OF FLORIDA

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 20th day of September, 2006, by Stuart M. Graham, Jr., M.D., who is known personally to me.

> Thomas E. Cochrane, Jr. Notary Public

> My commission expires:

MY COMMISSION # DD328249 EXFIRES: June 17, 2010

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE AND NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In accordance with Chapter 608.415, Florida Statutes, STUART M. GRAHAM, JR., M.D., P.L., desiring to organize under the laws of the State of Florida with its principal office as indicated in its Articles of Organization in the City of West Palm Beach, County of Palm Beach, State of Florida, has named as its agent to accept service of process within this state:

Thomas E. Cochrane, Jr. 2801 Exchange Court West Palm Beach, FL 33409

ACKNOWLEDGMENT:

Having been named as the registered agent for the above professional limited 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 as provided for in Chapter 608, Florida Statutes.

Dated: September 20, 2006

Thomas E. Cochrane, Jr.

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