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Division of Corporations

FAX NO.

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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : SHUTTS & BOWEN LLP OPERATING ACCOUNT

Account Number : 120030000037

Phone : (561) 835-8500

Fax Number : (561) 650-8530

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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Institute for Women's Health & Body of West Palm Bea

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION FOR FLORIDA
PROFESSIONAL LIMITED LIABILITY COMPANY**

ARTICLE I - Name

The name of the Professional Limited Liability Company is:

INSTITUTE FOR WOMEN'S HEALTH & BODY OF WEST PALM BEACH, FL

ARTICLE II - Address

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

Mailing and Street
Address:

560 Village Blvd., Ste. 335
West Palm Beach, FL 33409
Attn: Christine McKenna

ARTICLE III - Registered Agent and Office

The name and the Florida street address of the initial registered agent of the Professional Limited Liability Company are:

Registered Agent:

Christine McKenna

Street Address

560 Village Blvd.
Suite 335
West Palm Beach, Florida 33409

ARTICLE IV - Management

The Professional Limited Liability Company is to be managed by one or more Managers and is, therefore, a manager-managed company.

Date: October 13, 2006

**INSTITUTE FOR WOMEN'S HEALTH & BODY
OF WEST PALM BEACH, FL**
a Florida professional limited liability company

By: Christine McKenna
Christine McKenna, as authorized agent for
Physicians Management Services, LLC, Manager

(In accordance with section 608.408(5), Florida Statutes,
the execution of this affidavit constitutes an affirmation under
the penalties of perjury that the facts stated herein are true.)

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REGISTERED AGENT ACCEPTANCE

Having been named to accept service of process for the above stated professional limited liability company at the address designated in this certificate pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete discharge of its duties.

Christine McKenna



FILING FEES:
\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)

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