

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L07000005160  
FILED 8:00 AM  
January 16, 2007  
Sec. Of State  
dbruce

**Article I**

The name of the Limited Liability Company is:  
STRUCTURED MEDICAL SYSTEMS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
675 LIVE OAK LN  
WESTON, FL. US 33327

The mailing address of the Limited Liability Company is:  
PO BOX 267813  
WESTON, FL. US 33326

**Article III**

The purpose for which this Limited Liability Company is organized is:  
SOFTWARE AND SUPPORT FOR THE HEALTHCARE INDUSTRY.□□□□

**Article IV**

The name and Florida street address of the registered agent is:  
REINALDO CRESPO  
675 LIVE OAK LN  
WESTON, FL. 33327

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: REINALDO CRESPO

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
REINALDO CRESPO  
PO BOX 267813  
WESTON, FL. 33326 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

01/15/2007

Signature of member or an authorized representative of a member

Signature: REINALDO CRESPO