

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

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FILED 8:00 AM
July 23, 2007
Sec. Of State
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Article I

The name of the Limited Liability Company is:

POINT OF CARE CLINICS CONSULTING SERVICES, LLC

Article II

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

38156 MEDICAL CENTER AVE.
ZEPHYRHILLS, FL. 55340

The mailing address of the Limited Liability Company is:

PO BOX 1807
ZEPHYRHILLS, FL. 33539

Article III

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

MEDICAL AND PHYSICIAN CONSULTING SERVICES

Article IV

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

SULEMAN HASHMI
38156 MEDICAL CENTER AVE.
ZEPHYRHILLS, FL. 33540

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: SULEMAN HASHMI

Article V

The name and address of managing members/managers are:

Title: MGR
SULEMAN HASHMI
38156 MEDICAL CENTER AVE.
ZEPHYRHILLS, FL. 33540

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Article VI

The effective date for this Limited Liability Company shall be:

07/20/2007

Signature of member or an authorized representative of a member

Signature: SULEMAN HASHMI