

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

L07000082847
FILED 8:00 AM
August 13, 2007
Sec. Of State
ncausseaux

Article I

The name of the Limited Liability Company is:
PREPAID HEALTH SERVICES LLC

Article II

The street address of the principal office of the Limited Liability Company is:
5999 LAKE POINTE DR.
SUITE 608
ORLANDO, FL. US 32822

The mailing address of the Limited Liability Company is:
PO BOX 592700
ORLANDO, FL. US 328592700

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
DIVERSIFIED CONSULTANTS LLC
5999 LAKE POINTE DR
SUITE 608
ORLANDO, FL. 32822

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: ROBYN BAZEMORE

Article V

The name and address of managing members/managers are:

Title: MGR
DIVERSIFIED CONSULTANTS LLC
5999 LAKE POINTE DR
ORLANDO, FL. 32822 US

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Article VI

The effective date for this Limited Liability Company shall be:

08/15/2007

Signature of member or an authorized representative of a member

Signature: ROBYN BAZEMORE