

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

L07000109070
FILED 8:00 AM
October 29, 2007
Sec. Of State
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Article I

The name of the Limited Liability Company is:

BRUNS SMIT ARNP, LLC

Article II

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

401 NANCY DRIVE
HAINES CITY, FL. 33844

The mailing address of the Limited Liability Company is:

401 NANCY DRIVE
HAINES CITY, FL. 33844

Article III

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

MEDICAL SERVICES - NURSE PRACTITIONER

Article IV

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

DONALD J SMIT
30 FOURTH STREET, S.W.
WINTER HAVEN, FL. 33880

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: DONLAD J. SMIT

Article V

The name and address of managing members/managers are:

Title: MGRM
CYNTHIA S BRUNS-SMIT
401 NANCY DRIVE
HAINES CITY, FL. 33844

Title: MGR
DONALD J SMIT
401 NANCY DRIVE
HAINES CITY, FL. 33844

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Article VI

The effective date for this Limited Liability Company shall be:

11/01/2007

Signature of member or an authorized representative of a member

Signature: DONALD J. SMIT