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To:

Division of Corporations

Fax Number (850) 617-626

ougot Name AKERMAN SENTERFI

075471001363 Account Number : (305) 374-5600 Phone

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ORIDA/FOREIGN LIMITED LIABILITY CO.

FLORIDA COASTAL PEDIATRICS, LLC

Certificate of Status	0
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11/20/2007

JR

(H07000283117)

ARTICLES OF ORGANIZATION OF FLORIDA COASTAL PEDIATRICS, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is FLORIDA COASTAL PEDIATRICS, LLC

ARTICLE II: - Address

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

157 Dockside Circle Weston, Florida 33327

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

CorpDirect Agents, Inc. 515 East Park Avenue Tallahassee, FL 32301

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 as provided for in Chapter 608. F.S.

CorpDirect Agents, Inc., Registered Agent

Name: Katie Wonsch

Title: Assistant Secretary

ARTICLE IV: - Management

The Limited Liability Company is to be managed by one Managing Member, or more Managing members and is, therefore, a member - managed company.

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ARTICLE V: - Manager(s) or Managing Member(s)

The name and address of each Managing Member are as follows:

Managing Member:

Allan Greissman, M.D. 157 Dockside Circle Weston, Florida 33327

> Marshall R. Burack, Esq. Authorized Representative

Taskall & Burach

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Marshall R. Burack, Esq.
Typed or printed name of signee

SECRETARY OF STATEM DIVISION OF CORPORATION 07 NOV 20 AM 8: 25