Electronic Articles of Organization For Florida Limited Liability Company

L07000123048 FILED 8:00 AM December 11, 2007 Sec. Of State dbruce

Article I

The name of the Limited Liability Company is: INTERVENTIONAL PAIN PHYSICIANS, LLC

Article II

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

5622 MARINE PARKWAY SUITE 18 NEW PORT RICHEY, FL. 34652

The mailing address of the Limited Liability Company is:

P O BOX 340287 TAMPA, FL. 33694

Article III

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

TO PROVIDE MEDICAL AND SURGICAL CARE FOR PATIENTS WHO HAVE PAIN SYMPTOMS.

Article IV

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

MIMI CHEN 5622 MARINE PARKWAY SUITE 18 NEW PORT RICHEY, FL. 34652

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: MIMI CHEN

Article V

The name and address of managing members/managers are:

Title: MGR YEN, EATON P O BOX 340287 TAMPA, FL. 33694

Signature of member or an authorized representative of a member

Signature: LI MA

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