

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

L07000124232  
FILED 8:00 AM  
December 14, 2007  
Sec. Of State  
dcurry

**Article I**

The name of the Limited Liability Company is:  
CHOICE PREPAID HEALTHCARE, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
2295 N.W. CORPORATE BLVD  
SUITE 140  
BOCA RATON, FL. 33431

The mailing address of the Limited Liability Company is:  
2295 N.W. CORPORATE BLVD  
SUITE 140  
BOCA RATON, FL. 33431

**Article III**

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

**Article IV**

The name and Florida street address of the registered agent is:  
JAMES PRUDEN  
980 N. FEDERAL HWY  
SUITE 404  
BOCA RATON, FL. 33432

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: JAMES PRUDEN

## **Article V**

The name and address of managing members/managers are:

Title: MGRM  
GARY D BROWN  
1475 SANCTUARY LANE  
BOCA RATON, FL. 33431

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Signature of member or an authorized representative of a member

Signature: GARY BROWN