

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

L07000127669
FILED 8:00 AM
December 28, 2007
Sec. Of State
ncausseaux

Article I

The name of the Limited Liability Company is:

SOUTHEAST ANESTHESIA AND PAIN MEDICINE, LLC

Article II

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

5622 MARINE PKWY
STE 18
NEW PORT RICHEY, FL. 34652

The mailing address of the Limited Liability Company is:

19260 FISHERMANS BEND DRIVE
LUTZ, FL. 33558

Article III

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

PROVIDE PROFESSIONAL ANESTHESIA, PAIN MEDICINE AND ANY
OTHER RELATED HEALTH CARE SERVICE.

Article IV

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

HUI ZHU
19260 FISHERMANS BEND DRIVE
LUTZ, FL. 33558

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: HUI ZHU

Article V

The name and address of managing members/managers are:

Title: MGR
HUI ZHU MD
19260 FISHERMANS BEND DRIVE
LUTZ, FL. 33558

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Article VI

The effective date for this Limited Liability Company shall be:

12/27/2007

Signature of member or an authorized representative of a member

Signature: HUI ZHU