

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

L08000034901  
FILED 8:00 AM  
April 07, 2008  
Sec. Of State  
mthomas

**Article I**

The name of the Limited Liability Company is:

INSURANCE ADVOCATE BILLING SPECIALIST, L.L.C.

**Article II**

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

614 N. HIGHLAND AVENUE  
CLEARWATER, FL. 33755

The mailing address of the Limited Liability Company is:

614 N. HIGHLAND AVENUE  
CLEARWATER, FL. 33755

**Article III**

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

MEDICAL BILLING

**Article IV**

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

HEIDI M NOYES  
614 N. HIGHLAND AVENUE  
CLEARWATER, FL. 33755

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: HEIDI M. NOYES

### **Article V**

The name and address of managing members/managers are:

Title: MGR  
HEIDI NOYES  
614 N. HIGHLAND AVENUE  
CLEARWATER, FL. 33755

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### **Article VI**

The effective date for this Limited Liability Company shall be:

04/07/2008

Signature of member or an authorized representative of a member

Signature: HEIDI M. NOYES