

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

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FILED 8:00 AM
June 13, 2008
Sec. Of State
ncausseauX

Article I

The name of the Limited Liability Company is:
EMERGENCY COAST PHYSICIAN LLC

Article II

The street address of the principal office of the Limited Liability Company is:
222 TALQUIN COVE
DESTIN, FL. US 32541

The mailing address of the Limited Liability Company is:
P.O. BOX 5366
NICEVILLE, FL. 32578

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
MARY E MAY
222 TALQUIN COVE
DESTIN, FL. 32541

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: MARY E. MAY

Article V

The name and address of managing members/managers are:

Title: MGRM
MARY E MAY
P.O. BOX 5366
NICEVILLE, FL. 32578

Title: MGR
KEITH A MAY
P.O. BOX 5366
NICEVILLE, FL. 32578

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Article VI

The effective date for this Limited Liability Company shall be:

06/08/2008

Signature of member or an authorized representative of a member

Signature: MARY MAY