

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

Effective Date 10/02/08

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : FCA000000027
Phone : (305) 444-4994
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

SOUTH FLORIDA INJURY NETWORK, LLC

Certificate of Status	0
Certified Copy	1
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J. BRYAN

OCT - 6 2008

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF

SOUTH FLORIDA INJURY NETWORK, LLC

ARTICLE I - NAME

The name of the Limited Liability Company is

SOUTH FLORIDA INJURY NETWORK, LLC

Effective date October 2, 2008

Effective Date 10/02/08

ARTICLE II - ADDRESS

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

Mailing Address:

7951 SW 40 Street, Suite 206
Miami, FL 33155

Principal Address:

7951 SW 40 Street, Suite 206
Miami, FL 33155

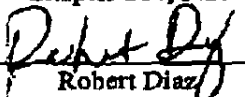
ARTICLE III - REGISTERED AGENT & REGISTERED AGENT'S SIGNATURE

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

Robert Diaz

7951 SW 40 Street, Suite 206
Miami, FL 33155

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 as provided for in Chapter 308, P.S.


Robert Diaz

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DIVISION OF CORPORATIONS
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ARTICLE IV - MANAGER

The name and the Florida street address of the managers or managing members is:

MGR:
Robert Diaz
7951 SW 40 Street, Suite 206
Miami, FL 33155


Robert Diaz

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(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)