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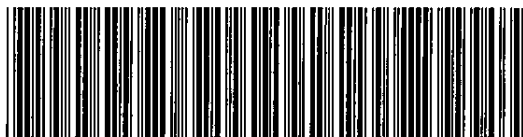
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 OCT 27 PM 12:46

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S. HAWKES

OCT 28 2008

EXAMINER

LAW OFFICES
FRANK J. GRECO, P.A.
A FLORIDA PROFESSIONAL ASSOCIATION
708 SOUTH CHURCH AVENUE
TAMPA FLORIDA 33620
TELEPHONE: (813) 287-0550
FAX: (813) 289-5331
Email: fgrecolaw@verizon.net

October 23, 2008

Department of State-
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: SHORELINE PHYSICIANS ASSOCIATES, LLC

Dear Sir or Madam:

Enclosed please find the articles of organization for the above referenced limited liability company, and certificate designating registered agent . Also enclosed is a check in the amount of \$130.00 to cover the fees, plus one certificate of good standing.

In addition to the above, upon filing, please send me a copy of the articles of organization in the self addressed envelope enclosed.

Should you have any questions regarding the above, please contact me immediately.

Sincerely,

~~FRANK J. GRECO, P.A.~~

Frank J. Greco

FJG/acp
Enclosures

**ARTICLES OF ORGANIZATION
OF
SHORELINE PHYSICIANS ASSOCIATION, LLC**

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SECRETARY OF STATE
TAMPA, FLORIDA

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

1. Name. The name of this limited liability company is **SHORELINE PHYSICIANS ASSOCIATION, LLC**.
2. Duration. The company shall exist from the date hereon until the occurrence of any of the events specified in Florida Statutes Section 608.441, unless contributed by the unanimous consent of all of the remaining members.
3. Mailing Address and Principal office Address. The company's mailing address is 2810 St. Isabel Street, Suite 201 B, Tampa, FL 33607. The Company's principal office address is 2810 St. Isabel Street, Suite 201 B, Tampa, FL 33607.
4. Registered Agent and Office. The name of the initial registered agent of the Company is **Frank J. Greco**. The street address of the initial registered agent of the company is **708 S. Church Ave., Tampa, FL 33609**.
5. The initial member is:

Name/ Address

Anthony F. Maniscalco
2710 St. Isabel Street, Suite #201
Tampa, FL 33607
6. Additional members to the Company may be admitted, but only if all the members agree to this admission of the additional members and to the terms of admission.
7. Management of the Company. The Company shall initially be managed by Anthony F. Maniscalco, who shall serve as manager until the first annual meeting of the members or until their successors are elected and qualify.
8. Regulations. The members shall have the power to adopt, alter, amend, or repeal regulations of the Company containing provisions for the regulation and management of the affairs of the Company.
9. Date of Existence of the Company. The existence of the Company shall commence on the date hereof.

The undersigned a managing member executed these Articles of Organization on
October 22, 2008 2008.

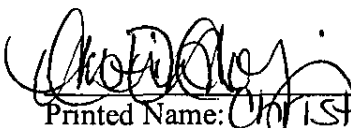

Anthony F. Maniscalco

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08 OCT 27 PM 12:46
TALLAHASSEE FLORIDA

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The Foregoing instrument was acknowledged before me this 22nd day of October,
2008, by **Anthony F. Maniscalco**, who is personally known to me or who has produced
_____ as identification.




Printed Name: Christina m. Cagnina
Notary Public
My commission Expires:
Serial Number:

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

In pursuance of the Florida Limited Liability Company Act ("Act") and Chapter 48 of Florida Statutes, the following is submitted, in compliance with said Act:

First -- that **SHORELINE PHYSICIANS ASSOCIATION, LLC**, desiring to organize under the laws of the State of Florida with its principal place of business in Hillsborough County, Florida, has named **FRANK J. GRECO located at 708 S. Church Ave., Tampa, Florida 33609**, as its agent to accept service of process within this state.

SHORELINE PHYSICIANS ASSOCIATION, LLC

By: 
Anthony F. Maniscalco, Member

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated limited liability company, at place designated in this certificate, I hereby am familiar with the responsibilities under law as registered agent and accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.


FRANK J. GRECO
Registered Agent