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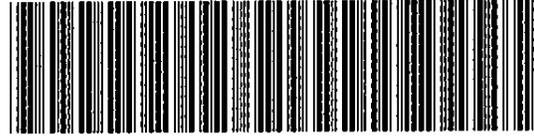
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EXAMINER

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. AUDRY CASTELLANOS-VIDAURRE, M.D.
(Corporation Name) (Document #)
2. LLC,
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
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NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

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ARTICLES OF ORGANIZATION
OF
AUDRY CASTELLANOS-VIDAURRE, M.D., LLC.
A FLORIDA LIMITED LIABILITY COMPANY

THE UNDERSIGNED, IN FORMING A FLORIDA LIMITED LIABILITY CO., UNDER THE FLORIDA LIMITED COMPANY ACT, CHAPTER 608 OF THE FLORIDA STATUTES, HEREBY ADOPT THE FOLLOWING ARTICLES OF ORGANIZATION FOR SUCH COMPANY:

ARTICLES I

NAME

THE NAME OF THE COMPANY IS: AUDRY CASTELLANOS-VIDAURRE, M.D., LLC.

ARTICLES II

OFFICE AND MAILING ADDRESS

THE INITIAL PRINCIPAL OFFICE OF THE COMPANY IS LOCATED AT 601 North Flamingo Road, Suite 203, Pembroke Pines, Fl 33028, AND THE MAILING ADDRESS OF THE COMPANY IS 541 NW 110 AVENUE, PLANTATION, FL 33324.

ARTICLES III

INITIAL REGISTERED OFFICE AND AGENT

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THE COMPANY IS 541 NW 110 AVENUE , PLANTATION, FL 33324, AND THE NAME OF THE INITIAL REGISTERED AGENT OF THE COMPANY AT THAT ADDRESS IS Audry Castellanos-Vidaurre.

ARTICLES IV
MANAGEMENT

THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY ONE MANAGER OR MORE MANAGERS AND IS, THEREFORE, A MANAGER-MANAGED CO.

IN WITNESS WHEREOF, THE UNDERSIGNED HAS EXECUTED THESE

ARTICLES OF ORGANIZATION THIS 2 DAY OF January,
2009.

AUDRY CASTELLANOS-VIDAURRE M.D., L.L.C.

BY: 
Audry Castellanos-Vidaurre

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

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, WE HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. WE FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF OUR DUTIES, AND WE ARE FAMILIAR AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN FLORIDA STATUTES, CHAPTER 608.

DATE: 1/21/09

BY: 
Audry Castellanos-Vidaurre