

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

L09000030488
FILED 8:00 AM
March 30, 2009
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:
MID-FLORIDA PAIN MANAGEMENT, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:
3220 S.W. 80TH AVENUE
OCALA, FL. 34481

The mailing address of the Limited Liability Company is:
3220 S.W. 80TH AVENUE
OCALA, FL. 34481

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:
ALAN S GASSMAN
1245 COURT STREET
SUITE 102
CLEARWATER, FL. 33756

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: ALAN S. GASSMAN

Article V

The name and address of managing members/managers are:

Title: MGR
GENE TURNER
3220 S.W. 80TH AVENUE
OCALA, FL. 34481

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Signature of member or an authorized representative of a member

Signature: ALAN S. GASSMAN