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Fax Number : (850)617-6383

From:

: CSH SERVICES, LLC Account Name Account Number : I20070000160

Phone (80C) 494-3124

: (561)455-9885 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

FLORIDA GULF COAST HEARING CENTER, LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Umited Liability Company is:

FLORIDA GULF COAST HEARING CENTER, LLC

ARTICLE II ADDRESS

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

11181 HEALTH PARK BOULEVARD, STE 1165 NAPLES, FLORIDA 34110

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

AARON A. FARMER, P.L. 999 VANDERBILT SEACH ROAD, STE 606 NAPLES, FLORIDA 34108

Having been named as registered agent 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 om familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

AARÓN A. FARMER, P.L./ Registered Agent's signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
PATRICK M. REIDY, M.D. .

11181 HEALTH PARK BOULEVARD, STE 1165
NAPLES, FLORIDA 34110

MANAGING MEMBER SAMUEL L. HILL, III, M.D. 11181 HEALTH PARK BOULEVARD, STE 1165 NAPLES, FLORIDA 34110 2009 JUL 13 AM 8: 04 SECRETARY OF STATE TAISLAHASSEE, FLORIDA

Signature of a member or an authorized representative of a member (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.

PATRICK M. REIDY, M.D.

4-09000161726-3.