

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

L10000002479
FILED 8:00 AM
January 07, 2010
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:

CENTRAL FLORIDA ANESTHESIA PROVIDERS, LLC

Article II

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

1304 SE 46TH STREET
OCALA, FL. 34480

The mailing address of the Limited Liability Company is:

1304 SE 46TH STREET
OCALA, FL. 34480

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:

LADDEN HERMANN
1304 SE 46TH STREET
OCALA, FL. 34480

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: LADDEN HERMANN

Article V

The name and address of managing members/managers are:

Title: MGR
LADDEN HERMANN
1304 SE 46TH STREET
OCALA, FL. 34480 US

Title: MGR
SHAWN A MOWRY
5182 SE 39TH LOOP
OCALA, FL. 34480

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Article VI

The effective date for this Limited Liability Company shall be:

01/06/2010

Signature of member or an authorized representative of a member

Signature: BECCA SHUFORD