

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

L10000015080
FILED 8:00 AM
February 09, 2010
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

ZAMAN FAMILY MEDICINE, PLLC

Article II

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

1929 MORGAN'S MILL CIRCLE
ORLANDO, FL. US 32825

The mailing address of the Limited Liability Company is:

P.O.BOX 2402
GOLDENROD, FL. US 32733

Article III

The purpose for which this Limited Liability Company is organized is:

THE PURPOSE OF THIS PLLC IS FOR MANAGING MEMBER NIKHAT
ZAMAN, D.O. TO CONDUCT PROFESSIONAL MEDICAL SERVICES.

Article IV

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

MUHAMMAD E MUSRI
1929 MORGAN'S MILL CIRCLE
ORLANDO, FL. 32825

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: MUHAMMAD MUSRI

Article V

The name and address of managing members/managers are:

Title: MGRM
NIKHAT ZAMAN
412 BARCLAY CT.
ALTAMONTE SPRINGS, FL. 32701 US

Title: MGR
MUHAMMAD E MUSRI
412 BARCLAY CT.
ALTAMONTE SPRINGS, FL. 32701 US

Signature of member or an authorized representative of a member

Signature: MUHAMMAD MUSRI

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