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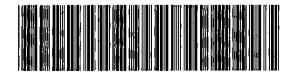
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COVER LETTER

TO:

Registration Section

`. Division of Co	orporations					
SURJECT: NICHOL	LAS A. HERRERO, M.C	D., PLLC				
		ed Liability Comp	any		_	
The enclosed Articles of	of Organization and fee(s) are	submitted for filin	g.			
Please return all corresp	condence concerning this mat	ter to the following	3;			
DAX NELSO	N					
		Name of Person				
DAX NELSO	N, P.A.				· · · · · · · · · · · · · · · · · · ·	
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	E-mail address: (to be used:	for future annual rep	ort notification)	5	- 1	-
For further information	concerning this matter, please	e call:				
DAX NELSON		at (813	739-6695			
Name of Person Area Code & Daytime Telephone Number				-		
Enclosed is a check for	or the following amount:					
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	■\$155.00 Filir Certified Co (additional cop	ру	\$160.00 Filing Certificate of S Certified Copy (additional copy is	tatus &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton F 2661 Ex	ourier Address ion Section of Corporations Building ecutive Center C see, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA PROFESSIONAL LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Professional Limited Liability Company is:

NICHOLAS A. HERRERO, M.D., PLLC, (the "Company")

ARTICLE II - ADDRESS

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

Principal Office Address:

2035 Professional Center Drive, Suite A Orange Park, FL 32073-4462

Mailing Address:

2035 Professional Center Driver Sui Orange Park, FL 32073-4462

ARTICLE III - PURPOSE

The purpose of this Professional Limited Liability Company shall be to engage in every phase and aspect of the business of rendering to the public the same professional medical services a physician, duly licensed under the laws of the State of Florida to practice medicine, is authorized to render; provided, that such professional services shall be rendered only through those corporate officers, employees, and agents who are duly licensed or otherwise legally authorized within the State of Florida to practice within the State of Florida; provided, further, that nothing herein contained shall be deemed to prevent the Company from employing unlicensed persons in capacities in which they will not render such professional services to the public in the course of their employment.

The Company may also engage in any other activities not specifically prohibited to a professional limited liability company under the "Florida Limited Liability Company Act" or the "Florida Professional Service Corporation and Limited Liability Company Act" (the "Florida Acts"), and shall also have the power to do all things necessary and proper to enable it to render such professional services and to engage in such activities, including, but not limited to, the powers enumerated in the Florida Acts or any amendments thereto, respectively, insofar as such powers do not conflict with the laws of the United States and the State of Florida.

ARTICLE IV - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Nicholas A. Herrero, M.D. 2035 Professional Center Drive, Suite A Orange Park, FL 32073-4462 Articles of Organization for Nicholas A. Herrero, M.D., PLLC

· 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 as provided for in Chapter 608, F.S..

Nicholas A. Herrero, M.D.

ARTICLE V - MANAGERS OR MANAGING MEMBERS

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

MGMR (Managing Member)

Nicholas A. Herrero, M.D.

2035 Professional Center Drive, Suite A
Orange Park, FL 32073-4462

2010 MAY 27 PM 3: 15
SECRETARY OF STATE
TALLAHASSEE, FEORIDA

REQUIRED SIGNATURE:

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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.)

Nicholas A. Herrero, M.D.

Typed or printed name of signee