

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

L10000060016  
FILED 8:00 AM  
June 04, 2010  
Sec. Of State  
ncausseaux

**Article I**

The name of the Limited Liability Company is:  
INTEGRATED HEALTHCARE PARTNERS, PLLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
923 WOODBRIDGE HOLLOW ROAD NORTH  
JACKSONVILLE, FL. US 32218

The mailing address of the Limited Liability Company is:  
923 WOODBRIDGE HOLLOW ROAD NORTH  
JACKSONVILLE, FL. US 32218

**Article III**

The purpose for which this Limited Liability Company is organized is:  
RENDER MEDICAL SERVICES, INCLUDING, WITHOUTH LIMITATION,  
MEDICAL CONSULTING SERVICES.

**Article IV**

The name and Florida street address of the registered agent is:  
WOOD, ATTER & WOLF, P.A.  
814 A1A NORTH  
202  
PONTE VEDRA BEACH, FL. 32082

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: MATTHEW T. HARROD

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
JOHN PRIOLEAU M.D.  
923 WOODBRIDGE HOLLOW ROAD NORTH  
JACKSONVILLE, FL. 32218 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

06/04/2010

Signature of member or an authorized representative of a member

Signature: MATTHEW T. HARROD