

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

L10000063878
FILED 8:00 AM
June 15, 2010
Sec. Of State
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Article I

The name of the Limited Liability Company is:

NEUROLOGY AND SLEEP CENTER, PLLC

Article II

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

2900 17TH STREET
SUITE 3
ST. CLOUD, FL. US 34769

The mailing address of the Limited Liability Company is:

2900 17TH STREET
SUITE 3
ST. CLOUD, FL. US 34769

Article III

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

THE PLLC IS ORGANIZED TO ENGAGE IN THE PRACTICE OF MEDICINE
AS A PROFESSIONAL LIMITED LIABILITY COMPANY, TO OWN &
OPERATE A MEDICAL CLINIC PROVIDING MEDICAL TREATMENT, & TO
ENGAGE IN SUCH OTHER LAWFUL ACTIVITIES NECESSARY OR USEFUL
TO THE F

Article IV

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

SHEADA MADANI ESQUIRE
37837 MERIDIAN AVENUE
SUITE 100
DADE CITY, FL. 33525

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: SHEADA MADANI

Article V

The name and address of managing members/managers are:

Title: MGRM
TARIQ B IRFAN
2900 17TH STREET, SUITE 3
ST. CLOUD, FL. 34769 US

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Article VI

The effective date for this Limited Liability Company shall be:

06/15/2010

Signature of member or an authorized representative of a member

Signature: SHEADA MADANI FOR TARIQ B. IRFAN