

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

L10000109203
FILED 8:00 AM
October 19, 2010
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:

ISPM OF FLORIDA, LLC

Article II

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

610 EAST OLYMPIA AVE
STE 100
PUNTA GORDA, FL. 33950

The mailing address of the Limited Liability Company is:

610 EAST OLYMPIA AVE
STE 100
PUNTA GORDA, FL. 33950

Article III

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

PAIN MANAGEMENT CLINIC

Article IV

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

HARBORSIDE SURGERY CENTER
610 EAST OLYMPIA AVE
STE 100
PUNTA GORDA, FL. 33950

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: STEPHEN ROSENBAUM

Article V

The name and address of managing members/managers are:

Title: MGR
ROBIN J FOWLER M.D.
281 WEST PACES FERRY RD NW
ATLANTA, GA. 30305

Title: MGR
STEPHEN ROSENBAUM
305 TRIMBLE CREST DR NE
ATLANTA, GA. 30342

Signature of member or an authorized representative of a member

Signature: SAMANTHA CRANDALL

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