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(City/State/Zip/Phone #)

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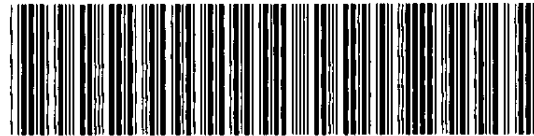
(Business Entity Name)

(Document Number)

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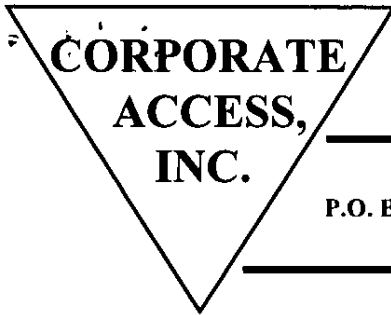
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1. Physicians Associates of Safety Harbor, LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL
INSTRUCTIONS:

EFFECTIVE DATE 1/20/2011

ARTICLES OF ORGANIZATION
OF
PHYSICIANS ASSOCIATES OF SAFETY HARBOR, LLC

FILED STATE
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The undersigned hereby certifies that he is the Authorized Representative of a Member who is forming a Limited Liability Company under Florida Statutes Chapters 608. The following Articles of Organization are hereby adopted.

ARTICLE I
NAME

The name of the Limited Liability Company shall be PHYSICIANS ASSOCIATES OF SAFETY HARBOR, LLC.

ARTICLE II
DURATION; EFFECTIVE DATE

This Limited Liability Company shall exist perpetually, commencing as January 20, 2011.

ARTICLE III
ADDRESS; PRINCIPAL OFFICE

The mailing and street address of the Limited Liability Company is 150 2nd Avenue North, Suite 1100, St. Petersburg, FL 33701.

ARTICLE IV
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Limited Liability Company is 150 2nd Avenue North, Suite 1100, St. Petersburg, FL 33701 and the name of its initial registered agent at such address is Thomas B. Smith.

ARTICLE V
PURPOSE

This Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and of this State.


ARTICLE VI
MANAGEMENT

Management of the Limited Liability Company is reserved to its Members in accordance with the Operating Agreement of the Limited Liability Company.

The undersigned, being the Authorized Representative of a Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization PHYSICIANS ASSOCIATES OF SAFETY HARBOR, LLC.

Executed by the undersigned on January 20, 2011.

AUTHORIZED REPRESENTATIVE OF
THE MEMBER




Thomas B. Smith

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT
ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Section 608.415, Florida Statutes, I agree to act in the capacity of Registered Agent for PHYSICIANS ASSOCIATES OF SAFETY HARBOR, LLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 608.415, Florida Statutes.

DATED this January 20, 2011.



Thomas B. Smith