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To:

Division of Corporations

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From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839

Fax Number : (305)592-9591

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:			

FLORIDA LIMITED LIABILITY CO. PERFORMANCE ORTHOPAEDICS & NEUROSURGERY, L.L.C.

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANYTARY OF STATE

ARTICLE I - Name:

The name of the Limited Liability Company is:

PERFORMANCE ORTHOPAEDICS & NEUROSURGERY, L.L.C.

ARTICLE II - Address:

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

2750 CORAL WAY, #200 MIAMI, FL 33145

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

BRIAN MEVORAH 2750 CORAL WAY, #200 MIAMI, FL 33145

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 provider for in Chapter 608, F.S.

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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.)

BRIAN MEVORAH

Typed or printed name of signee

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SECRETARY DESTATE

ARTICLE V - Member(s) & Managing Member(s)

The name(s) and address(s) of the initial member(s) of the Company is/are:

<u>NAME</u>

ADDRESS

TITLE

BRIAN MEVORAH

2750 CORAL WAY, #200 MIAMI, FL 33145 MGR MBR

IN WITNESS WHEREOF, the undersigned member(s) has/have made and subscribed these Articles of Organization at LESTER BARRERAS, C.P.A., P.A. 1987

N.W. 88 CT., STE. 201 MIAMI, FL 33172 for the foregoing uses and purposes this

3 day of May 20 1

BRIAN MEVORAH, MANAGER MEMBER