(((H110002792643)))

on the top and bottom of all pages of the document.



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To

Division of Corporations

Fax Number

From:

: BROAD AND CASSEL - MIAMI OFFICE Account Name

Account Number : 120100000075 Phone : (305)373-9445 Fax Number : (305)373-9443

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

Email Address: lepauley@aol.com

FLORIDA LIMITED LIABILITY CO.

Joseph A. Durozel, M.D., LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

HelpNOV 2 9 2011

EXAMINER

11/28/2011

Fax Audit No. H11000279264 3

ARTICLES OF ORGANIZATION OF JOSEPH A. DUROZEL, M.D., LLC

ARTICLE I Name

The name of the Limited Liability Company is Joseph A. Durozel, M.D., LLC (the "Company").

ARTICLE II Address

The street address of the principal office of the Company is 2740 SW 97th Avenue, Suite 111, Miami, Florida 33165 and the mailing address of the Company is P.O. Box 160010, Hialeah, Florida 33016.

ARTICLE III Registered Agent

The name of the Company's registered agent in the State of Florida is Neuroscience Consultants, LLP and the address of the Company's registered office is 9960 NW 116 Way, Suite 13, Medley, Florida 33178.

ARTICLE IV Duration

The period of duration for the Company shall be perpetual.

ARTICLE V Management

The Company is to be a member-managed company and the name and address of the initial member is:

P.O. Box 160010
Hialeah, Florida 33016

Fax Audit No. H11000279264 3

4839-0585-6650 I 31843/0001

Fax Audit No. H11000279264 3

ARTICLE VI Admission of Additional Members

Members shall have the right to admit additional members as provided by the Florida Limited Liability Company Act by a vote of a majority-in-interest of the members.

ARTICLE VII Members' Rights to Continue Business

The death, retirement, resignation, expulsion, dissolution, bankruptcy, dissociation or withdrawal of any member, or the occurrence of any other event that terminates the continued membership of any member shall not cause the Company to be dissolved or its affairs to be wound-up, and upon the occurrence of any such event, the Company shall be continued without dissolution and without any affirmative action or requirement on the part of the members.

MEMBER:

Neuroscience Consultants, LLP, a Florida limited liability partnership

By: Lanny Pauley, Chief Executive Officer and

Authorized Representative

HILED

11 NOV 28 AM 9: 08

SECRETARY OF STATE
TALLAHASSEE, FINALE

Fax Audit No. H11000279264 3

4839-0385-6650.1 31843/0001

Fax Audit No. H11000279264 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.407 OR 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is Joseph A. Durozel, M.D., LLC
- 2. The name and address of the registered agent and office is: Neuroscience Consultants, LLP, 9960 NW 116 Way, Suite 13, Medley, Florida 33178.

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.

3

Neuroscience Consultants, LLP, a Florida limited liability partnership

Lanny Pauley, Chief Executive

Lanny Pauley, Chief Executive Officer

ASSEE.

8 AM 9: 08

Fax Audit No. H11000279264 3

4839-0385-6650 I 31843/0001