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FLORIDA LIMITED LIABILITY CO.
Timothy Ward, M.D., P.L.

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EXAMINER

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**ARTICLES OF ORGANIZATION
OF**

TIMOTHY WARD, M.D., P.L.

The undersigned organizer, who is the authorized representative of Timothy Ward, M.D., P.L. (the "Company") under the Florida Professional Service Corporation and Limited Liability Company Act, hereby adopts the following Articles of Organization.

ARTICLE I - NAME

The name of the Company is Timothy Ward, M.D., P.L.

ARTICLE II - PRINCIPAL OFFICE

The street address of the principal office of the Company and the mailing address of the Company are 663 Ponte Vedra Beach Boulevard, Unit C, Ponte Vedra Beach, Florida 32082.

ARTICLE III - NATURE OF BUSINESS

The purpose for which this Corporation is organized is to provide professional medical and healthcare services.

ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS

The name and street address of the initial registered agent are Timothy Ward, M.D., 663 Ponte Vedra Beach Boulevard, Unit C, Ponte Vedra Beach, Florida 32082.

ARTICLE V - EFFECTIVE DATE

The effective date of the organization of this Company shall be January 1, 2013.

ARTICLE VI - MANAGEMENT

The Company shall be a manager-managed company. The initial manager shall be Timothy Ward, M.D.

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization on the 27th day of December, 2012.



Brian Zargham
Authorized Representative

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EFFECTIVE DATE 01/01/13

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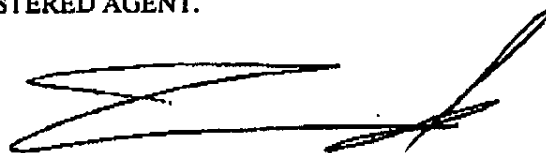
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**CERTIFICATE OF DESIGNATION
OF REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement to designate a registered office and registered agent in the state of Florida.

1. The name of the Limited Liability Company is Timothy Ward, M.D., P.L.
2. The name and mailing address of the registered agent are Timothy Ward, M.D., 663 Ponte Vedra Beach Boulevard, Unit C, Ponte Vedra Beach, Florida 32082.

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, TIMOTHY WARD, M.D., HEREBY ACCEPTS THE APPOINTMENT AS REGISTERED AGENT AND AGREES TO ACT IN THIS CAPACITY. TIMOTHY WARD, M.D., FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF HIS DUTIES AND IS FAMILIAR WITH AND ACCEPTS THE OBLIGATIONS OF HIS POSITION AS REGISTERED AGENT.



Timothy Ward, M.D.

Date: December 27, 2012

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