

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

L13000050979
FILED 8:00 AM
April 08, 2013
Sec. Of State
bbostick

Article I

The name of the Limited Liability Company is:
HEALTHCARE PROVIDER SOLUTIONS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
8290 GATE PARKWAY W
UNIT 140
JACKSONVILLE, FL. US 32216

The mailing address of the Limited Liability Company is:
8290 GATE PARKWAY W
UNIT 140
JACKSONVILLE, FL. US 32216

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
ZACH M STOCKWELL
8290 GATE PARKWAY W
UNIT 140
JACKSONVILLE, FL. 32216

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: ZACH M. STOCKWELL

Article V

The name and address of managing members/managers are:

Title: MGRM
ZACH M STOCKWELL
8290 GATE PARKWAY W UNIT 140
JACKSONVILLE, FL. 32216 US

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Signature of member or an authorized representative of a member

Electronic Signature: NATALIE NUNEZ, LEGALZOOM.COM, INC.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.