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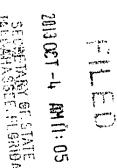
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

GUPTA SURGICAL CONSULTING, LLC	
(Must end with the words '	Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street addre	ss of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2640 SW 32ND PLACE	2640 SW 32ND PLACE
OCALA, FLORIDA 34471	OCALA, FLORIDA 34471
ARTICLE III - Registered Agent,	Registered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent,	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another and the second of the
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another in.) ess of the registered agent are:
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration The name and the Florida street addresses	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another in.) ess of the registered agent are:
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration The name and the Florida street addresses	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another in.) ess of the registered agent are:
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration. The name and the Florida street addresserved in the NIRAV GUPTA  2640 SW 32ND PLA	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another n.) ess of the registered agent are:
ARTICLE III - Registered Agent, (The Limited Liability Company cannot serve as business entity with an active Florida registration.  The name and the Florida street addresserved in NIRAV GUPTA  2640 SW 32ND PLA	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another in.) ess of the registered agent are:

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 provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Memb	per
MGR	NIRAV GUPTA, D.O.
· · · · · · · · · · · · · · · · · · ·	2640 SW 32ND PLACE
	OCALA, FLORIDA 34471
LE V: Effective date, if other	than the date of filing: (OPTIONA
Tective date is listed, the da or 90 days after the date of t	<u>-</u> .
LE V: Effective date, if other fective date is listed, the da	te must be specific and cannot be more than five busine ling.)
LE V: Effective date, if other fective date is listed, the date or 90 days after the date of t	te must be specific and cannot be more than five busine ling.)
LE V: Effective date, if other fective date is listed, the date or 90 days after the date of f	ite must be specific and cannot be more than five busine filing.)
LE V: Effective date, if other fective date is listed, the date or 90 days after the date of fective date of fective date.  REQUIRED SIGNATURE:	a member or an authorized representative of a member.
LE V: Effective date, if other fective date is listed, the date of 90 days after the date of fective date after the date of fective days after the date of fective days after the days after	a member or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution of this document is incomment to the Department of Sides.
LE V: Effective date, if other fective date is listed, the date or 90 days after the date of fective date after the date of fective days after day fall am aware that any fall constitutes a third degree.	a member or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution of this document is incomment to the Department of Sides.
LE V: Effective date, if other fective date is listed, the date or 90 days after the date of fective date after the date of fective days after day fective days after days after days at hird degree days after days after days after days at hird degree days after the date of fective days after days	a member or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true.  lise information submitted in a document to the Department of States.
LE V: Effective date, if other fective date is listed, the date or 90 days after the date of fective date after the date of fective days after day fall am aware that any fall constitutes a third degree.	a member or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution of this document is incomment to the Department of Sides.

ARTICLE IV- Manager(s) or Managing Member(s):

\$ 5.00 Certificate of Status (Optional)