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Effective Date January 2014

Florida Department of State
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FLORIDA LIMITED LIABILITY CO.

Freeman Anesthesiology, LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name and Address

The name of this Limited Liability Company is:

Freeman Anesthesiology, LLC

The mailing address and street address of the Limited Liability Company are:

6245 5th Ave N.
St. Petersburg, FL 33701

ARTICLE II

Term of Existence

This Limited Liability Company shall have perpetual existence, commencing upon January 1, 2014.

ARTICLE III

Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

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ARTICLE IV

Powers

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at3812 W Linebaugh Ave., Suite 102, Tampa, FL 33618,, 813-875-1333.

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ARTICLE V
Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is:

6245 5th Ave N.
St. Petersburg, FL 33701

and the name of its registered agent at such address is:

Robert Boos, Jr.

ARTICLE VI
Effective Date

The effective date of this Limited Liability Company shall be January 1, 2014.

ARTICLE VII
Management

This Limited Liability Company shall have One Manager(s) or Managing Member(s). The name and address of Manager(s) or Managing Member(s) are:

Name and Address

Bobbie Freeman, Managing Member
6245 5th Ave N.
St. Petersburg, FL 33701

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Dated: Wednesday, November 20, 2013

DocuSigned by:
[signature]
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Bobbie Freeman

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ACCEPTANCE BY REGISTERED AGENT

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.

Date: November 20, 2013

DocuSigned by:
Robert Boos, Jr.
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Robert Boos, Jr.

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