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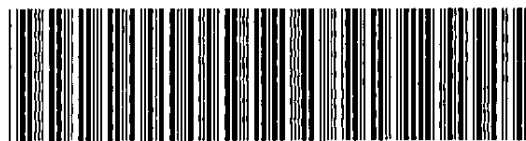
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
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Williams & Cres Medical Billing, LLC

- Art of Inc. File _____
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- L.C. File _____
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ARTICLES OF ORGANIZATION
OF
WILLIAMS & CREWS MEDICAL BILLING, LLC

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TALLAHASSEE, FLORIDA

The undersigned, acting as authorized representative of this limited liability company (the "LLC") pursuant to Chapter 605 of the Florida Statutes (the "Act"), hereby forms a limited liability company under the laws of the State of Florida and adopts the following Articles of Organization for such limited liability company:

ARTICLE I

NAME

The name of the LLC shall be **WILLIAMS & CREWS MEDICAL BILLING, LLC**, or such other name selected by the Members as may be acceptable to the appropriate recording official of the State of Florida.

ARTICLE II

PURPOSES AND POWERS

The LLC is authorized to engage in any business or businesses authorized by the laws of the State of Florida, and in general, to carry on any and all incidental business; to have and exercise all

the powers conferred by the laws of the State of Florida, and to do any and all things herein set forth to the same extent as a natural person might or could do.

Nothing herein contained shall be deemed or construed as authorizing or permitting, or purporting to authorize or permit the LLC to carry on any business, exercise any power, or do any act which a limited liability company may not, under the laws of the State of Florida, lawfully carry on, exercise, or do.

ARTICLE III
PRINCIPAL PLACE OF BUSINESS

The mailing address of the principal office of the LLC shall be 4131 NW 13th Street, Suite 101, Gainesville, Florida 32609, and the street address of the principal office of the LLC shall be 4131 NW 13th Street, Suite 101, Gainesville, Florida 32609, or at such other location as may be agreed in writing by the Members.

ARTICLE IV
DURATION

This Agreement shall be come effective on the date hereof, and the LLC shall have perpetual existence.

ARTICLE V
LIMITED LIABILITY COMPANY POWERS

All the LLC powers shall be exercised by or under the authority of, and the business and affairs of this LLC shall be managed under the direction of the Managers of this LLC. This Article may be amended from time to time in the regulations of the LLC by a unanimous vote of the Members of the LLC.

ARTICLE VI
MANAGEMENT

The LLC is to be managed by its managers, and is, therefore, a manager-managed company. The name and address of such managers who are to serve as managers are:

<u>NAME</u>	<u>ADDRESS</u>
DAVID W. WILLIAMS	4131 NW 13th Street, Suite 101 Gainesville, FL 32609
MICHAEL W. CREWS	4131 NW 13th Street, Suite 101 Gainesville, FL 32609

ARTICLE VII

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the LLC is 4131 NW 13th Street, Suite 101, City of Gainesville, County of Alachua, State of Florida 32609, and the name of its initial registered agent at such address is **MICHAEL W. CREWS**.

ARTICLE VIII

RESTRICTIONS ON MEMBERSHIP

Members shall have the right to admit new members by the written consent of a majority in interest of the Members of the LLC. Contributions required of new members shall be determined as of the time of admission to the LLC.

A Member's interest in the LLC may not be sold or otherwise transferred except as shall be provided in the regulations adopted by the Members.

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member, or the occurrence of any other event that terminates the continued membership of a Member in the LLC, the LLC shall continue unless the Members, by unanimous vote, dissolve the LLC.

The undersigned, an authorized representative representing the original Members of the LLC, hereby certifies that the foregoing constitutes the proposed Articles of Organization of **WILLIAMS & CREWS MEDICAL BILLING, LLC**, a Florida limited liability company.

ARTICLE IX

AMENDMENT TO ARTICLES OF ORGANIZATION

Except as otherwise provided herein, the Members of the LLC reserve the right to amend, alter, change or repeal any provision contained herein in the manner now or hereafter prescribed by law and all rights conferred upon the Members herein are granted subject to this reservation.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 17 day of JULY, 2014.


MICHAEL W. CREWS
Authorized Representative

STATE OF FLORIDA
COUNTY OF ALACHUA

The foregoing instrument was acknowledged before me this 17 day of July, 2014, by MICHAEL W. CREWS, an Authorized Representative of WILLIAMS & CREWS MEDICAL BILLING, LLC, a Florida limited liability company, [] who has produced a driver's license issued within 5 years from date as identification; OR [] who is personally known to me; OR [] who produced Other: _____, as identification.


Notary Public
Printed Name: RITA D. WORLEY
Commission No.:

My Commission Expires:
(Affix Notary Seal)



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TALLAHASSEE, FLORIDA


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

Pursuant to the provisions of Chapter 605, Florida Statutes, the undersigned Limited Liability Company 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 **WILLIAMS & CREWS MEDICAL BILLING, LLC.**
- (2) The name and address of the registered agent and office is **MICHAEL W. CREWS, 4131 NW 13th Street, Suite 101, Gainesville, Florida 32609.**

Having been named as registered agent and to accept service of process for the above-named 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.

Dated: July 17, 2014.


MICHAEL W. CREWS,
Registered Agent