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## FLORIDA LIMITED LIABILITY CO.

### Pinellas County Primary Care and Hospitalists, PLLC

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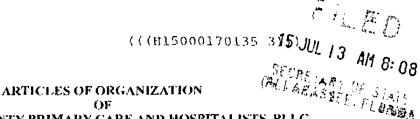
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### OF PINELLAS COUNTY PRIMARY CARE AND HOSPITALISTS, PLLC

The undersigned hereby certifics that he is a Member who is forming a Professional Limited Liabitity Company under Chapters 605 and 621, Florida Statutes. The following Articles of Organization are hereby adopted.

#### ARTICLE L NAME

The name of the Professional Limited Liability Company shall be Pinclas County Primary Care and Hospitalists, PLLC.

#### ARTICLE IL DURATION; EFFECTIVE DATE

This Professional Limited Liability Company shall exist perpetually commencing as of the date of filing of these Articles of Organization.

#### ARTICLE III. MAILING ADDRESS; PRINCIPAL OFFICE

The mailing address and principal office address of the Professional Limited Liability Company is 320 Overbrook Drive, Belleair, FL 33756.

#### ARTICLE IV. INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the Professional Limited Liability Company is 320 Overbrook Drive, Belleair, FL 33756, and the name of its initial registered agent at such address is Michael P. Wanger, M.D.

#### ARTICLE V. PURPOSE

This Professional Limited Limbility Company is organized for the purpose of rendering health care services, including related ancillary services. This Professional Limited Liability Company shall engage in no other business.

#### ARTICLE VI. RESTRICTIONS ON MEMBERSHIP; RIGHT TO ADMIT ADDITIONAL MEMBERS

Members must be either licensed to practice medicine in the State of Florida, or an entity wholly owned by individuals licensed to practice medicine in the State of Florida. A member's interest in the Professional Limited Liability Company may not be sold or otherwise transferred except to a person licensed to practice medicine in the State of Florida, or to an entity wholly owned by individuals licensed to practice medicine in the State of Florida and only in accordance with the provisions of the Operating Agreement of this Professional Limited Liability Company.

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The undersigned, being one of the Members of the Professional Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of Pinellas County Primary Care and Hospitalists, PLLC.

Executed by the undersigned on June 30, 2015.

Michael P. Wanger, M.D.

Ml Wym no

Member

# ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT ACKNOWLEDGMENT OF REGISTERED AGENT

Pursuant to Chapters 605 and 621, Florida Statutes, I agree to act in the capacity of Registered Agent for Pinellas County Primary Care and Hospitalists, PLLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties, I am familiar with and accept the obligations of Section 605,0113, Florida Statutes.

DATED this 30 day of June, 2015.

Michael P. Wanger, M.D.

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