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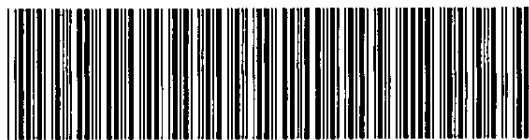
(Business Entity Name)

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JAN 26 2016

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ALLIANCE COMPREHENSIVE CARE, LLC

Signature _____

Requested by: BAN

1/22

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

_____ Art of Inc. File _____
_____ LTD Partnership File _____
_____ Foreign Corp. File _____
_____ L.C. File _____
_____ Fictitious Name File _____
_____ Trade/Service Mark _____
_____ Merger File _____
_____ Art. of Amend. File _____
_____ RA Resignation _____
_____ Dissolution / Withdrawal _____
_____ Annual Report / Reinstatement _____
_____ Cert. Copy _____
_____ Photo Copy _____
_____ Certificate of Good Standing _____
_____ Certificate of Status _____
_____ Certificate of Fictitious Name _____
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_____ Officer Search _____
_____ Fictitious Search _____
_____ Fictitious Owner Search _____
_____ Vehicle Search _____
_____ Driving Record _____
_____ UCC 1 or 3 File _____
_____ UCC 11 Search _____
_____ UCC 11 Retrieval _____
_____ Courier _____

ARTICLES OF ORGANIZATION
OF
ALLIANCE COMPREHENSIVE CARE, PLLC

The undersigned, for the purpose of forming a professional limited liability company under the Florida Professional Service Corporation and Limited Liability Company Act, Chapter 621, Florida Statutes, hereby makes, acknowledges and files these Articles of Organization.

ARTICLE I - NAME

The name of the Limited Liability Company shall be ALLIANCE COMPREHENSIVE CARE, PLLC ("Company").

ARTICLE II - ADDRESS

The mailing address of the principal office shall be 1800 SE 17th Street, Suite 800, Ocala, Florida, 34471.

ARTICLE III – DURATION AND PURPOSE

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall be perpetual, unless earlier dissolved as provided in the Operating Agreement. The Company shall provide medical services through its members who shall be licensed in medicine.

ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the Registered Agent of the Company in the State of Florida is Dr. Anwar A. Khan, 3310 SW 58th Street, Ocala, Florida, 34471.

ARTICLE V - CAPITAL CONTRIBUTIONS

The members of the Company shall contribute to the capital of the Company the cash or property as more fully set forth in the Operating Agreement.

ARTICLE VI - ADDITIONAL CAPITAL CONTRIBUTIONS

Each member shall make additional capital contributions to the Company as set forth in the Operating Agreement.

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ARTICLE VII - MANAGEMENT

Company shall be managed by its member/manager in accordance with the terms and conditions of the Operating Agreement. The Operating Agreement may contain other provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the organizer of the Company is: Dr. Anwar A. Khan, 3310 SW 58th Street, Ocala, Florida, 34471.


IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at Ocala, Marion County, Florida on this 22 day of Jan., 2016.



DR. ANWAR A. KHAN

STATE OF FLORIDA
COUNTY OF MARION

The foregoing was acknowledged this 22 day of Jan., 2016, by DR. ANWAR A. KHAN, who is (a) _____ personally known to me or (b) ☒ produced a driver license as identification.



Notary Public

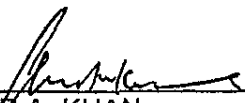


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SECRETARY OF STATE
TAMALA TROTTER
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CERTIFICATE OF ACCEPTANCE BY REGISTERED AGENT

DR. ANWAR A. KHAN, being the person named in the Articles of Organization of ALLIANCE COMPREHENSIVE CARE, LLC as the Registered Agent of this Limited Liability Company, hereby consents to acceptance of service of process for the above stated Company at the place designated in the Articles of Organization, and accepts the appointment as Registered Agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of her duties, and is familiar with, and accepts the obligations of the position of Registered Agent.

Dated this 22 day of Jan, 2016.



DR. ANWAR A. KHAN

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CLERK OF STATE
TALLAHASSEE, FLORIDA