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FLORIDA LIMITED LIABILITY CO. Innovative Healthcare Technology Solutions, LLC

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Articles of Organization of Innovative Healthcare Technology Solutions, LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of the Limited Liability Company is Innovative Healthcare Technology Solutions, LLC (the "Company").

ARTICLE II Address

The mailing address and street address of the principal office of the Company is 1110 133rd Ct. NE, Bradenton, Florida 34212.

ARTICLE III Registered Agent

The name of the Company's registered agent in the State of Florida is Guy Neff, M.D., and the address of the Company's registered office is 1110 133rd Ct. NE, Bradenton, Florida 34212.

ARTICLE IV Duration

The period of duration for the Company shall be perpetual.

ARTICLE V Management

The Company is to be a manager-managed company and the names and addresses of the initial managers are:

Guy W. Neff, M.D. 1110 133rd Ct. NE Bradenton, Florida 34212

Vincent Hayes, MBA 7503 Abbey Glen Lake Wood Ranch, Florida 34202

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization of Innovative Healthcare Technology Solutions, LLC this 27th day of September, 2016.

AUTHORIZED REPRESENTATIVE:

Guy W. Neff, M.D.

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CERTIFICATE OF DESIGNATION

OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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: Innovative Healthcare Technology Solutions, LLC
- The name and address of the registered agent and office is: Guy W. Neff, M.D., 1110 133rd Ct. NE, Bradenton, Florida 34212.

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.

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