

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L17000148387
FILED 8:00 AM
July 11, 2017
Sec. Of State
slsingleton**

Article I

The name of the Limited Liability Company is:
CHOICE MEDICAL BILLING SERVICES LLC

Article II

The street address of the principal office of the Limited Liability Company is:
5745 CANTON COVE
SUITE 121
WINTER SPRINGS, FL. 32708

The mailing address of the Limited Liability Company is:
5745 CANTON COVE
SUITE 121
WINTER SPRINGS, FL. 32708

Article III

Other provisions, if any:
MEDICAL BILLING SERVICES

Article IV

The name and Florida street address of the registered agent is:
ANGEL RODMAN
5745 CANTON COVE
SUITE 121
WINTER SPRINGS, FL. 32708

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.

Registered Agent Signature: ANGEL RODMAN

Article V

The name and address of person(s) authorized to manage LLC:

Title: AMBR
FAIZA FAISAL
5745 CANTON COVE
WINTER SPRINGS, FL. 32708

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Signature of member or an authorized representative

Electronic Signature: ANGEL RODMAN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.