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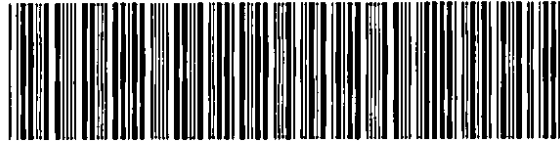
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Porter Medical Services, LLC

(CORPORATE NAME AND DOCUMENT #)

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**SPECIAL
INSTRUCTIONS:**

**ARTICLES OF ORGANIZATION
OF
PORTER MEDICAL SERVICES, LLC**

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, Florida Statutes Chapter 605, does hereby adopt the following Articles of Organization.

Article 1. - Name

The name of the limited liability company is Porter Medical Services, LLC (the "Company").

Article 2. - Commencement & Duration

The Company shall commence upon the filing with the Florida Department of State and shall continue to exist perpetually.

Article 3. - Company Address

The street address of the Company's principal office is 7350 Sandlake Commons, #2205, Orlando, FL 32819, and the mailing address of the Company is the same.

Article 4. - Registered Office & Agent

The name of the Company's initial registered agent in Florida is ~~Thomas~~ ^{Tom} M. Porter. The address of the Company's registered office in Florida is 7350 Sandlake Commons, #2205, Orlando, Florida 32819.


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Article 5. - Management

The Company is to be managed by managers and is, therefore, a manager-managed company and the initial managers and their address is:

<u>Title</u>	<u>Name and Address</u>
MGR	^{Tom} Thomas M. Porter 7350 Sandlake Commons, #2205, Orlando, Florida 32819
MGR	Trista Pavelski 7350 Sandlake Commons, #2205, Orlando, Florida 32819

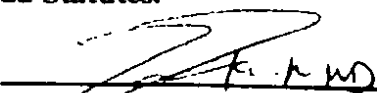
In accordance with Section 605.0203(1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.



Tom Thomas M. Porter
Date: August 21, 2017

Statement Accepting Appointment as Registered Agent

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 as provided in Chapter 605, Florida Statutes.



Tom Thomas M. Porter, Registered Agent
Date: August 21, 2017

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