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**FLORIDA LIMITED LIABILITY CO.
ORTHOHEME CONSULTANTS, LLC.**

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ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: OrthoHeme Consultants, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 11401 NW 19th Street, Plantation, FL 33323.

ARTICLE III - DURATION

This limited liability company shall have perpetual existence.

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by its Members, Bruce Berkowitz, M.D. and Joanna Berkowitz, M.D., 11401 NW 19th Street, Plantation, FL 33323.

ARTICLE V - INITIAL REGISTERED AGENT AND OFFICE

The initial registered agent for this limited liability company and the street address of the initial registered agent is: Jeffrey R. Eisensmith, P.A., 5561 N. University Drive, Suite 103, Coral Springs, Florida 33067.

ARTICLE VI - ADDITIONAL MEMBERS

This limited liability company may admit additional members subject to approval by vote of a majority of the existing members.

ARTICLE VII - REGULATIONS

The regulations of this limited liability company may only be adopted, amended, altered or repealed by vote of a majority of the members.

ARTICLE VIII - MEMBERS' RIGHT TO CONTINUE BUSINESS

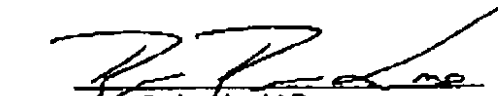
The members remaining after the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or after any other event which terminates the membership of a member, have the right to continue the business of this limited liability company subject to approval by unanimous vote of the remaining members.

ARTICLE IX - AMENDMENT


This limited liability company reserves the right to amend, alter or repeal any provision contained in these Articles of Organization in accordance with the Florida Limited Liability Company Act.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this
6th day of January, 2018.

Members:



Bruce Berkowitz, M.D.



Joanna Berkowitz, M.D.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 605.0203 (1)(b),
Florida Statutes, the undersigned Limited Liability Company
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: OrthoHerne Consultants, LLC.
2. The name and address of the registered agent and office is: JEFFREY R. EISENSMITH, P.A.,
5561 N. University Drive, Suite 103, Coral Springs, Florida 33067.

Having been named as a 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.

Signature: _____

Date

11/8/18