

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

**L18000083872
FILED 8:00 AM
April 03, 2018
Sec. Of State
syoun**

Article I

The name of the Limited Liability Company is:

INFECTIOUS DISEASE OF THE PALM BEACHES, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

223 VIA D ESTE
APT 1905
DELRAY BEACH, FL. 33445

The mailing address of the Limited Liability Company is:

PO BOX 6789
DELRAY BEACH, FL. US 33484

Article III

The name and Florida street address of the registered agent is:

DOUGLAS COHEN
11248 WESTLAND CIR
BOYNTON BEACH, FL. 33437

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: DOUGLAS COHEN

Article IV

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

Title: MGRM
MOHAMED ERRITOUNI, M.D., INC.
20136 PALM ISLAND DR
BOCA RATON, FL. 33498 US

Title: MGRM
CHRISTOPHER D. CORTES, M.D., INC.
223 VIA D ESTE APT 1905
DELRAY BEACH, FL. 33445 US

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Article V

The effective date for this Limited Liability Company shall be:

04/02/2018

Signature of member or an authorized representative

Electronic Signature: DOUGLAS COHEN

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.