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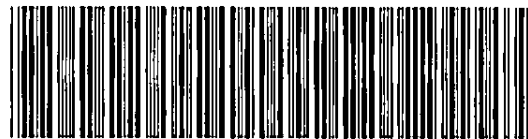
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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: FDHS Employed Physicians Division, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Radha Bachman

Name of Person

Fisher Broyles, LLP

Firm/Company

4830 W Kennedy Blvd., Ste 600

Address

Tampa, FL 33609

City/State and Zip Code

terri.zahn@fdhs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Radha Bachman at ( 813 ) 200-6114

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☒

\$130.00 Filing Fee &  
Certificate of Status

☐

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐

\$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

2016 NOV 13 AM 11:00  
FILED  
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JUDICIAL CIRCUIT IN AND FOR  
THE STATE OF FLORIDA  
CLERK'S OFFICE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
FDHS EMPLOYED PHYSICIANS DIVISION, LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, does hereby form a limited liability company under the laws of the State of Florida.

**ARTICLE I  
Name**

The name of the limited liability company shall be **FDHS EMPLOYED PHYSICIANS DIVISION, LLC**.

**ARTICLE II  
Initial Principal Office Street and Mailing Address**

The Company's initial principal office street address and mailing address is 10920 Technology Terrace, Lakewood Ranch, FL 34211.

**Article III  
Period of Duration**

The limited liability company shall begin existence on the day of filing, and shall continue in perpetuity, or until dissolved in a manner provided by law or by regulation adopted by the Members of the limited liability company.

**Article IV  
Purposes**

The limited liability company may engage in the transaction of any or all lawful business for which limited liability companies may be formed under the laws of the State of Florida.

**Article V  
Registered Office and Registered Agent**

The street address of its initial registered office of the Company is 10920 Technology Terrace, Lakewood Ranch, FL 34211, and the name of its initial registered agent at that address is Arun Khazanchi, M.D.

**Article VI  
Management**

The Company is member-managed and the name of the initial member is Florida Digestive Health Specialists, LLP, 10920 Technology Terrace, Lakewood Ranch, FL 34211.

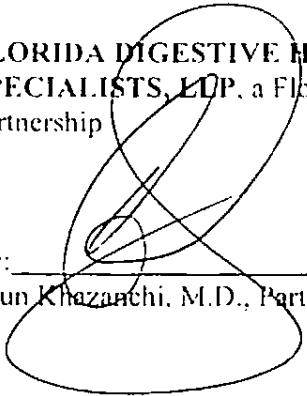
**Article VII**  
**Admission of Additional Members**

Members shall have the right to admit additional members as provided by the Florida Limited Liability Company Act and the Company's Operating Agreement.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization the 8<sup>th</sup> day of November 2018.

**MEMBER:**

**FLORIDA DIGESTIVE HEALTH  
SPECIALISTS, LLP**, a Florida limited liability  
partnership

By:   
Arun Khazanchi, M.D., Partner

### ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the duties and obligations of its position as registered agent.

Dated this 8<sup>th</sup> day of November 2018.

REGISTERED AGENT:

Arun Khazanchi, M.D.

