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BONE AND JOINT MANAGEMENT LLC

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ahhe Hage

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabilit	y Company is:			
Bone and Joint Mana		132. 6	11.0 n	
(Must cont	ain the words "Limited Li	ability Compa	ny, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street a	ddress of the principal off	ice of the Limi	ited Liability Company is:	
<b>.</b>			<b>NA</b> 112	
Princip	al Office Address:		Mailing Address:	
10131 West Forest F	Iill Boulevard		0131 West Forest Hill Boulevard	
Suite 230			Suite 230	
Wellington, FL 334	14		Wellington, FL 33414	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street	cannot serve as its own Factive Florida registration address of the registered and BLUMBERGEXCEL.	Registered Age  L)  Ingent are:  SIOR CORPO  Name  L, 1st FL	nt. You must designate an individual or RATE SERVICES, INC.	
	TALLAHASSEE	FL	32301	
	City	State	Zip	
place designated in this certificate further agree to comply with the pa	. I hereby accept the appo rovisions of all statutes rel pligations of my position a	intment as regi ating to the pro s registered ag	r the above stated limited liability company at the stered agent and agree to act in this capacity. I oper and complete performance of my duties, an ent as provided for in Chapter 605, F.S  gnature (REQUIRED)	

(CONTINUED)

Asst. Secretary, Jose Mojica

ODEC 23 PH 4: 45

<u>Tltle:</u>	Name and Address:
"AMBR" = Autho	
"MOR" = Manage	
AMBR	Michael Morgan
	10131 West Forest Hill Boulevard, Suite 230
	Wellington, FL 33414
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if	
CLE V: Effective date effective date is listed e of filing.) If the date inserted in	if other than the date of filing: (OPTIONAL) the date must be specific and cannot be more than five business days prior to or 90 days at this block does not meet the applicable statutory filing requirements, this date will not be liste
CLE V: Effective date fective date is listed to filling.) If the date inserted in tument's effective date	this block does not meet the applicable statutory filling requirements, this date will not be liste on the Department of State's records.
CLE V: Effective date fective date is listed to filling.) If the date inserted in tument's effective date	if other than the date of filing: (OPTIONAL) the date must be specific and cannot be more than five business days prior to or 90 days af this block does not meet the applicable statutory filing requirements, this date will not be liste e on the Department of State's records.
CLE V: Effective date fective date is listed to filling.) If the date inserted in tument's effective date	the date must be specific and cannot be more than five business days prior to or 90 days at this block does not meet the applicable statutory filling requirements, this date will not be liste to on the Department of State's records.
CLE V: Effective date is listed of filing.) If the date inserted in cument's effective date CLE VI: Other provis	the date must be specific and cannot be more than five business days prior to or 90 days at this block does not meet the applicable statutory filling requirements, this date will not be listed on the Department of State's records.
CLE V: Effective date fective date is listed to filling.) If the date inserted in cument's effective date in provise the value of the provise the value of value of the value of value of the value of the value of the value of the value of value of the value of value of the value of value	if other than the date of filing:
CLE V: Effective date  ffective date is listed e of filing.) If the date inserted in cument's effective da  CLE VI: Other provis  REOURED SIG	the date must be specific and cannot be more than five business days prior to or 90 days at this block does not meet the applicable statutory filling requirements, this date will not be liste to on the Department of State's records.
CLE V: Effective date is listed of filing.) If the date inserted in cument's effective date inserted in CLE VI: Other provis  REOURED SIG	sif other than the date of filing:
CLE V: Effective date is listed of filing.) If the date inserted in cument's effective date inserted in CLE VI: Other provis  REOURED SIG	signature of a member of an authorized representative of a member.  Signature of a member of a national responsibility of a member.  Signature of a member of a national responsibility of a member.  ATURE:  Signature of a member of a national responsibility of a member.  Is document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  In aware that any false information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
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ARTICLE IV-