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FLORIDA LIMITED LIABILITY CO.  
PHYSICIANS GROUP OF SOUTH FLORIDA, SPECIALTY DIVISION, LLC

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**ARTICLES OF ORGANIZATION  
OF  
PHYSICIANS GROUP OF SOUTH FLORIDA, SPECIALTY DIVISION, LLC**

The undersigned, being a duly authorized representative of a member, desiring to form a limited liability company under and pursuant to the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, does hereby adopt the following Articles of Organization:

**ARTICLE I  
NAME**

The name of the limited liability company is: **PHYSICIANS GROUP OF SOUTH FLORIDA, SPECIALTY DIVISION, LLC** (the "Company").

**ARTICLE II  
ADDRESS**

The mailing address and street address of the principal office of the Company is:

Principal Office Address:

1801 NE 123rd Street, Suite 405  
North Miami, FL 33181

Mailing Address:

1801 NE 123rd Street, Suite 405  
North Miami, FL 33181

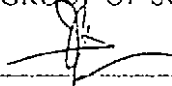
**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S  
SIGNATURE**

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

Physicians Group of South Florida, P.A.  
1801 NE 123rd Street, Suite 405  
North Miami, FL 33181

*Having been named as registered agent and to accept service of process for the above 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 for in Chapter 605, F.S.*

PHYSICIANS GROUP OF SOUTH FLORIDA, P.A.

By:   
Jane S. Cohen, M.D., President

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**ARTICLE IV**  
**OPERATING AGREEMENT**

The power to adopt, alter, amend, or repeal an operating agreement for the Company shall be vested in the Members of the Company.

**ARTICLE V**  
**MANAGEMENT**

The name and address of each person authorized to manage and control the Company:

Title:

Manager

Name and Address:

Physicians Group of South Florida, P.A.  
1801 NE 123rd Street, Suite 405  
North Miami, FL 33181

IN WITNESS WHEREOF, the undersigned hereby executes these Articles of Organization as of the 21st day of October, 2024.

Duly Authorized Representative of a Member



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Jane S. Cohen, M.D.

Duly Authorized Representative and President of a Member