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June 21, 1999

Corporate Records Bureau
Division of Corporations
Department of State
409 East Gaines Street
Tallahassee, Florida 32301

Re: The Cosmetic Vein Center, L.C.

200002914302--9
-06/24/99--01067--009
****337.50 ****337.50

Gentlemen:

Enclosed is an original and one copy of proposed Articles of Incorporation for the referenced corporation, together with a check payable to your order covering the following items:

Filing Fee	\$250.00
Registered Agent Designation	35.00
Certified Copy of Articles of Incorporation	<u>52.50</u>
TOTAL	\$337.50

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DIVISION OF CORPORATIONS
59 JUN 21 AM 9:29

Kindly return to us a certified copy of the Articles of Incorporation.

Very truly yours,



J. Doyle Tumbleson

mtm
6/29

JDT/ssb
Enclosures

50 YEARS OF EXCELLENCE

**ARTICLES OF ORGANIZATION
OF
THE COSMETIC VEIN CENTER, L.C.
A Florida Limited Liability Company**

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, Florida Statutes, entitled The Florida Limited Liability Company Act, hereby adopts the following Articles of Organization for the Company.

**ARTICLE I
NAME**

The name of the Company is The Cosmetic Vein Center, L.C.

**ARTICLE II
PURPOSE**

The Company is being formed to engage in any activities or business permitted for this Company under the laws of the State of Florida.

**ARTICLE III
EXISTENCE AND DURATION**

These Articles of Organization shall become effective on June 1, 1999, provided these Articles are filed by the Department of State within five (5) days of their signing and acknowledgment. If not, these Articles shall become effective upon the date they are filed by the Department of State. The Company shall exist in perpetuity, unless dissolved pursuant to the provisions of §608.441, Florida Statutes, or pursuant to the Company's Operating Agreement.

**ARTICLE IV
PRINCIPAL OFFICE**

The mailing address and street address of the principal office of the Company is 873 Sterthaus Drive, Suite 202, Ormond Beach, Florida 32174.

**ARTICLE V
REGISTERED AGENT AND OFFICE**

The name and address of the initial registered agent and office of the Company is as follows: J. Doyle Tumbleson, 150 S. Palmetto Avenue, Suite A, Daytona Beach, Florida 32114.

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AND BUSINESS SERVICES
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**ARTICLE VI
ADMISSION OF ADDITIONAL MEMBERS**

Additional members may be admitted upon the approval of a majority of the members of the Company upon the written application of such new member in the manner set forth in the Operating Agreement of the Company.

**ARTICLE VII
RIGHT TO CONTINUE BUSINESS**

In the event of the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or upon the occurrence of any other event which terminates the membership of a member in the Company, the business of the Company will be continued, unless the Company is dissolved in the manner provided in the Operating Agreement.

**ARTICLE VIII
MANAGEMENT**

The Company is to be managed by the members and the names and addresses of the members are as follows:

Michael P. Harrington, M.D., P.A.	311 North Clyde Morris Boulevard, Suite 550 Daytona Beach, Florida 32114
Harry H. Black, M.D., P.A.	311 North Clyde Morris Boulevard, Suite 550 Daytona Beach, Florida 32114
Michael A. Fabian, M.D., P.A.	311 North Clyde Morris Boulevard, Suite 550 Daytona Beach, Florida 32114

**ARTICLE IX
ADOPTION AND AMENDMENT OF OPERATING AGREEMENT**

The power to adopt, alter, amend or repeal the Operating Agreement of the Company shall be vested in the members of the Company as provided in the Operating Agreement.

IN WITNESS WHEREOF, the undersigned has executed these Articles May 28, 1999.

Witnesses:

Debra Harrington
Benea Price

HARRY H. BLACK, M.D., P.A.

By: *Harry H. Black*

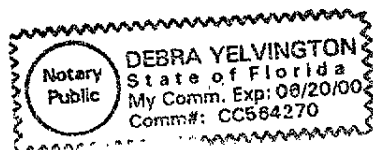
Harry H. Black, President

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DIVISION OF CORPORATE
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STATE OF FLORIDA }
COUNTY OF VOLUSIA }

BEFORE ME, the undersigned authority, personally appeared HARRY H. BLACK, to me known to be the person who executed the foregoing Articles of Organization, and he acknowledged to and before me that he executed such instrument in his capacity as President of HARRY H. BLACK, M.D., P.A.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 28th day of May, 1999.



Debra Yelvington

Notary Public
Commission Number CC564270

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DIVISION OF CORPORATIONS
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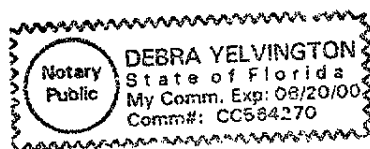
The undersigned hereby accepts the designation of Registered Agent of The Cosmetic Vein Center, L.C. as set forth in Article V of these Articles.

J. Doyle Tumbleson
J. DOYLE TUMBLESON

STATE OF FLORIDA }
COUNTY OF VOLUSIA }

BEFORE ME, the undersigned authority, personally appeared J. DOYLE TUMBLESON, in his capacity as Registered Agent of The Cosmetic Vein Center, L.C., to me known to be the person who executed the above acceptance.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 28th day of May, 1999.



Debra Yelvington

Notary Public
Commission Number CC564270

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member of The Cosmetic Vein Center, L.C., deposes and says:

- (1) The above named Limited Liability Company has at least one member.
- (2) The total amount of cash contributed by the members is \$1,000.00.
- (3) The agreed value of property other than cash contributed by the members is \$ -0-.
- (4) The total amount of cash or property anticipated to be contributed by the members is \$12,000.00. This total includes amounts from 2 and 3 above.
- (5) The members shall make additional contributions to capital at such times and in such amounts as the members shall determine to be necessary for carrying out the purposes for which the Company is being formed.

Witnesses:

Debra Yelvington
Berna Price

HARRY H. BLACK, M.D., P.A.

By:

Harry H. Black, President

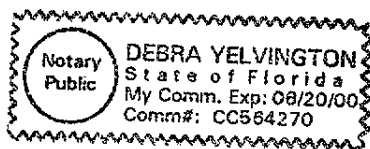
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SECRETARY OF STATE
DIVISION OF CORPORATE
REGISTRATION
FILED

STATE OF FLORIDA }
COUNTY OF VOLUSIA }

BEFORE ME, the undersigned authority, personally appeared HARRY H. BLACK, to me known to be the person who executed the foregoing Affidavit of Membership and Contributions, and he acknowledged to and before me that he executed such instrument in his capacity as President of **HARRY H. BLACK, M.D., P.A.**

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 28th day of May, 1999.



Debra Yelvington
Notary Public
Commission Number CC564270

(In accordance with § 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)