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LIMITED LIABILITY COMPANY

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Anesco North Broward, LLC

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ARTICLES OF ORGANIZATION OF ANESCO NORTH BROWARD, LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- 1. NAME. The name of the Limited Liability Company is ANESCO NORTH BROWARD, LLC, (the "Company").
- 2. <u>PERIOD OF DURATION</u>. The period of duration of the Company shall be perpetual.
- 3. <u>PURPOSE</u>. The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.
- 4. <u>MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE</u>. The street address of the principal office and mailing address of the Company is 1511 East Commercial Boulevard, Suite 146, Fort Lauderdale, Florida 33334.
- 5. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent for the Company is: Richard Meli, M.D., 2515 N.E. 7th Place, Fort Lauderdale, Florida 33304.
- 6. <u>ADDITIONAL MEMBERS</u>. The Managing Members, by majority vote, may admit additional members without a vote of the Members upon such terms and conditions as they shall determine in their sole discretion.
- 7. CONTINUITY; NO RIGHT TO DISTRIBUTION ON WITHDRAWAL. The remaining Members of the limited liability company will have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in this limited liability company. No Member shall be entitled to receive a return of capital or other distribution upon withdrawal from this limited liability company or otherwise, except as otherwise provided in the Regulations of this limited liability company.

Prepared by:

Scott H. Margol, Esq., FL Bar # 0522848 Ruden, McClosky, et al, P.O. Box 1900

Ft. Lauderdale, Florida 33301

Phone: 954-764-6660 Fax: 954-764-4996

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8. MANAGEMENT. The business of the limited liability company shall be managed by one or more Members. The name and address of the initial Managing Members, who will serve until the first annual meeting of members or until their successors are elected and qualified, are as follows:

Name	Address	
Richard Meli, M.D.	2515 NE 7th Pl. Ft. Lauderdale, FL 33304	
Scott Snyder, M.D.	3031 North Ocean Boulevard, #1702 . Fort Lauderdale, Florida 33308	
Paul Kolbert, M.D.	3105 Canterbury Drive Boca Raton, Florida 33434	

The undersigned has executed these Articles of Organization on the 30 day of 1999.

ly: _____/ 4

Richard Meli, M.D., Managing Member

Prepared by:

Scott H. Margol, Esq., FL Bar # 0522848 Rudon, McClorky, et al, P.O. Box 1900 Pt Lauderdale, Blorida 33301 Phone: 954-764-6660 Fax: 954-754-4996

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS .

The undersigned authorized representative and managing member of ANESCO NORTH BROWARD, LLC, 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 \$ 100.00
- 3. No property other than cash is being contributed by the members.

4. The total amount of additional contributions anticipated to be made by the members is S

Richard Meii, M.D., Managing Member

(In accordance with Section 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.)

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CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: ANESCO NORTH BROWARD, LLC.
- The name and address of the registered agent and office is:

Richard Meli, M.D. 2515 NE 7th Pl. Ft. Lauderdale, FL 33304

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 its 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.

Richard Meli, M.D.

Registered Agent

(Date)

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