

**Electronic Articles of Organization
For
Florida Limited Liability Company**

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Sec. Of State

Article I

The name of the Limited Liability Company is:

FOLLOW THROUGH PHYSICAL THERAPY SERVICES LLC

Article II

The street address of the principal office of the Limited Liability Company is:

12749 WEST HILLSBOROUGH AVE
SUITE A
TAMPA, FL. 33635

The mailing address of the Limited Liability Company is:

4639 AYRON TERRACE
PALM HARBOR, FL. 34685

Article III

The purpose for which this Limited Liability Company is organized is:

PRACTICE OF PHYSICAL THERAPY □ □

Article IV

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

AMY W WELSH
4639 AYRON TERRACE
PALM HARBOR, FL. 34685

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 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.

Registered Agent Signature: AMY WOODS WELSH

Signature of member or an authorized representative of a member

Signature: AMY WOODS WELSH