## December 1, 2000 000 000 15368

Harvey Brown 8295 North Military Trail Suit F Palm Beach Gardens, FL 33410

Office: 561-627-7598 Cell: 561-523-1919 900003484879--7 -12/04/00--01100--016 \*\*\*\*\*130.00 \*\*\*\*130.00

To Florida Department of State Staff:

Thank you so much for being so helpful to me on the telephone and answering my questions.

Thanks,

Harvey Brown

SECRETARY OF STATE

L00-15268

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LLC

The name of the Limited Liability Company is: INSIGHT TO RECOVERY, A
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:  8295 NORTH MILITARY TRAIL  SUITE F  PALM BEACH GARDENS, FL 33410
PALM BEACH GARDENS, FL 33410
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
HARVEY BROWN Name
Name
8295 NORTH MILITARY TRAIL JUITE F
Florida street address (P.O. Box NOT acceptable) PALM BEACH GARDENS FL 33410
City, State, and Zip
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 as provided for in Chapter 608, Fish Registered Agent's Signature  Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more managers and is on therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
Hawey Brow
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
HARVEY BROWN  Typed or printed name of signee
Typed or printed name of signee
\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)