Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : M. BURR KEIM COMPANY

Account Number : 119990000242 Phone : (215)563-8113 Fax Number : (215)977-9386 OZ FEB 27 PM 1: 40

LIMITED LIABILITY COMPANY

INTEGRATIVE ORIENTAL MEDICINE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

SECRETARY OF STATE TALLAHASSEE, FLORID

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FORTLANDS		-
ARTICLE I - Name: The name of the Limited Liability Company is: INTEGRATIVE ORIENTAL MEDICINE, LLC		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com 5560A North Ocean Blvd., Ocean Ridge, FL 33435	opany i	is:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature	e:	SECR
The name and the Florida street address of the registered agent are:	02	ETAR
Daniel Lewis	FFB	35
Name		
5560A North Ocean Blvd. Florida street address (P.O. Box NOT acceptable) Ocean Ridge FL 33435 City, State, and Zip	27	LORIUA
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this affacity. I further agree to comply with the provint statutes relating to the proper and complete performance of my exities, and I am familiar was accept the obligations of my position as registered as provided for in Chapter 608, I Registered Agent's Signature Article IV - Management (Check box if applicable.)	nt as Isions o vith and 7.S.	of all d
The Limited Liability Company is to be managed by one manager or more manager therefore, a manager - managed company. (An additional article must be added if an affective date is requested)	s and i	2,
Signature of a member or all authorized representative of a member.		

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

Daniel Lewis

Typed or printed name of signee

Filing Fees:
\$150,00 Elling Fee for Articles of Organization
\$ 25,00 Designation of Registered Agent
\$ 30,00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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