

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

L03000000495  
FILED 8:00 AM  
January 06, 2003  
Sec. Of State

**Article I**

The name of the Limited Liability Company is:  
INSTITUTE OF NATURAL THERAPUTICS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
6450 FIRST AVENUE NORTH  
SAINT PETERSBURG, FL. 33710

The mailing address of the Limited Liability Company is:  
6450 FIRST AVENUE NORTH  
SAINT PETERSBURG, FL. 33710

**Article III**

The name and Florida street address of the registered agent is:  
JOHN FITZGERALD  
6450 FIRST AVENUE NORTH  
SAINT PETERSBURG, FL. 33710

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: JOHN FITZGERALD

## **Article IV**

The name and address of managing members/managers are:

Title: MGRM  
INT THERAPY CENTER, LLC  
6450 FIRST AVENUE NORTH  
SAINT PETERSBURG, FL. 33710

**L03000000495  
FILED 8:00 AM  
January 06, 2003  
Sec. Of State**

Signature of member or an authorized representative of a member

Signature: JOHN FITZGERALD