

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247 Phone : (305)674-3313

Fax Number :... (305) 674-3359

LIMITED LIABILITY COMPANY

SPECTRA HEALTH GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

ARTICLES OF ORGANIZATION FOR A FLORIDA

LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is: SPECTRA HEALTH GROUP, LLC

ARTICLE II: Address

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

4528 sw 74 AVE. MIAMI, FLORIDA 33155

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

DAVID GACKSTETTER

4528 sw 74 AVE. MIAMI, FLORIDA 33155

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accent the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions or all statutes relating to the proper and complete synformance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608. F.S.

DAVID GACKSTETTER / Registered Agent's Signature

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by members and is, therefore, Member Managed Company.

ARTICLE V: MEMBERS (optional)

MEMBER:

DAVID JACKSTETTER

4528 SW 74 AVE.

MIAMI, FLORIDA 33155

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.)

DAVID GACKSTETTER