

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

L04000057017
FILED 8:00 AM
August 02, 2004
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:
RECOVERY ASSIST, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
12 OCEAN VIEW DRIVE
PENSACOLA BEACH, FL. 32561

The mailing address of the Limited Liability Company is:
P.O. BOX 1526
GULF BREEZE, FL. 32562

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
SHERRY COLLINS
12 OCEAN VIEW DRIVE
PENSACOLA BEACH, FL. 32561

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: SHERRY COLLINS

Article V

The name and address of managing members/managers are:

Title: MGR
SHERRY COLLINS
P.O. BOX 1526
GULF BREEZE, FL. 32562

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Article VI

The effective date for this Limited Liability Company shall be:

08/02/2004

Signature of member or an authorized representative of a member

Signature: SHERRY COLLINS