

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

L04000069342  
FILED 8:00 AM  
September 23, 2004  
Sec. Of State  
Irrivers

**Article I**

The name of the Limited Liability Company is:  
TOTAL VITALITY HEALTH CARE, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
P.O. BOX 2663  
CAPE CORAL, FL. US 33915

The mailing address of the Limited Liability Company is:  
P.O. BOX 2663  
CAPE CORAL, FL. US 33915

**Article III**

The purpose for which this Limited Liability Company is organized is:  
CHIROPRACTIC CENTER FOR HEALTH CARE

**Article IV**

The name and Florida street address of the registered agent is:  
KRISTINE K JOHNSON  
523 CAPE CORAL PARKWAY  
CAPE CORAL, FL. 33904

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: KRISTINE K JOHNSON

## **Article V**

The name and address of managing members/managers are:

Title: MGR  
KRISTINE K JOHNSON  
P.O. BOX 2663  
CAPE CORAL, FL. 33915 US

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Signature of member or an authorized representative of a member

Signature: WAYNE BURKETT