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Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

LIMITED LIABILITY COMPANY

Integrative Chiropractic & Physical Therapy Solution

Certificate of Status	0
Certified Copy	0
Page Count	023
Estimated Charge	\$125.00

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DIVISION OF CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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:
Integrative Chiropractic & Physical Therapy Solutions, LLC

ARTICLE II ADDRESS

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

RB Office Park Units A&B
4657 Gulf Breeze Highway
Gulf Breeze, FL 32563

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

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

Dr. Karen Cann
RB Office Park Units A&B
4657 Gulf Breeze Highway
Gulf Breeze, FL 32563

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
accept the appointment as registered agent and agree to act in this capacity. I
further agree to comply with the provisions all statutes relating to the proper and
complete performance of my duties, and I am familiar with accept the obligations of
my position as registered agent as provided for in Chapter 608, F.S..



Registered Agent's Signature

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APR 18 2005
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Page 2 Integrated Chiropractic & Physical Therapy Solutions, LLC

ARTICLE IV

The name and address of the managing member of the LLC is:

Managing Member:

Dr. Karen Cann

2478 Houston Circle

Gulf Breeze, FL 32563



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.

Dr. Karen Cann

2005 APR 18 A 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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