Division of Corporations Public Access System

#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000234243 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From: 0

Account Name : SONNENSCHRIN NATH & ROSENTHAL, LLP

Account Number : 120040000039 Phone : (561)833-2410

Fax Number

: (561)833-8387

RECHERTOR 5 OCT - 3 AM TANA ISION OF CORADSON

### LIMITED LIABILITY COMPANY

St. Lucie Physical Medicine, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Name:

Composate Fling

Public Access Help

SECRETARY OF SIATEMENT OF CORPORATION

## ARTICLES OF ORGANIZATION

#### ST. LUCIE PHYSICAL MEDICINE, LLC,

a Florida limited liability company

#### ARTICLE I - NAME

The name of this Florida limited liability company is ST. LUCIE PHYSICAL MEDICINE, LLC (the "Company").

#### **ARTICLE II - ADDRESS**

The mailing address and the street address of the principal office of the Company is 160 NW Central Park Place, Port St. Lucie, Florida 34987.

#### ARTICLE III - INITIAL REGISTERED AGENT

The name and Florida street address of the Registered Agent of the Company are JOSHUA K. SMITH, 500 University Boulevard, Ste. 211, Jupiter, Florida 33458.

#### ARTICLE IV - MANAGER

The name and address of the Manager of the Company is:

JOSHUA K. SMITH 500 University Boulevard, Ste. 211 Jupiter, FL 33458

#### ARTICLE V - COMPANY EXISTENCE

The Company's existence shall be effective as of the time of the filing of these Articles of Organization with the Florida Department of State and its existence shall be perpetual.

DATE: October 3, 2005.

SETH SMITH, Member

ABACOA TOWN CENTER CHIROPRACTIC, INC., a

Florida corporation, Member

by Mitchell D. Schepps, as Afforney-in-Fact

MITCHELL D. SCHEPPS, ESQ. Sonnenschein Nath & Rosenthal LLP 777 South Flagler Drive, Ste. 600E West Palm Beach, FL 33401 Telephone No.: 561-833-2410 Fax No.: 561-833-8387 Florida Bar No.: 0979139

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE

#### LIMITED LIABILITY COMPANY:

ST. LUCIE PHYSICAL MEDICINE, LLC

#### REGISTERED AGENT AND REGISTERED OFFICE:

JOSHUA K. SMITH 500 University Boulevard, Ste. 211 Jupiter, FL 33458

Having been named as Registered Agent and to accept service of process for the Company named above at the place designated in this Certificate, I hereby agree to 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 as provided for in Chapter 608, Florida Statutes.

JOSHUA K. SMITH, Registered Agent by Mitchell D. Schepps, as Attorney-in-Fact

DATE: October 3, 2005

23353143\0801\17494069\V-1

SECRETARY OF STATE SECRETARY OF STATE OF CORPORATIONS

MITCHELL D. SCHEPPS, ESQ. Somenschein Nath & Rosenthal LLP 777 South Flagler Drive, Ste. 600E West Palm Beach, FL 33401 Telephone No.: 561-833-2410 Fax No.: 561-833-8387 Florida Bar No.: 0979139