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ACCOUNT NO. : 072100000032

REFERENCE: 850084

AUTHORIZATION : C

COST LIMIT :

ORDER DATE: February 3, 2006

ORDER TIME : 10:08 AM

ORDER NO. : 850084-005

CUSTOMER NO: 85036A

DOMESTIC FILING

NAME:

THE DISC INSTITUTE OF SAINT

PETERSBURG, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION THE DISC INSTITUTE OF SAINT PETERSBURG, LLC

The undersigned authorized agent of Member adopts the following Articles of Organization pursuant to the provisions of the Florida Limited Liability Company Act "Act").

ARTICLE I. NAME OF COMPANY

KILED S PAND. 25 The name of the limited liability company is THE DISC INSTITUTE OF SAI PETERSBURG, LLC (the "Company").

ARTICLE II. MAILING ADDRESS OF COMPANY

The mailing address and street address of the Company shall be 4050 Tampa Road, Suite D, Oldsmar, Florida 34677.

ARTICLE III. PERIOD OF DURATION

The Company's period of duration shall commence upon the filing of these Articles with the Secretary of State of the State of Florida and be perpetual thereafter.

ARTICLE IV. REGISTERED OFFICE AND AGENT

The address of the Company's principal office is as follows: 4050 Tampa Road, Suite D, Oldsmar, Florida 34677. The name and address of the Company's initial registered agent in the State of Florida is as follows: Robert A. Forlizzo, Esquire, 2903 Rigsby Lane, Safety Harbor, Florida 34695.

ARTICLE V. MANAGEMENT

The Company will be managed by one (1) Manager in accordance with the Company's Operating Agreement and Regulations. The name and business address of the sole initial Manager who shall serve until the first annual meeting of Members or until his successor is elected and qualified is:

NAME

ADDRESS

DR. CARL G. CONFORTI

4050 Tampa Road, Suite D Oldsmar, FL 34677

ARTICLE VI. PURPOSE

The Company is organized for any lawful purpose for which a limited liability company may be organized pursuant to the Act.

IN WITNESS WHEREOF, the following authorized agent of Member has executed these Articles of Organization on this day of d

ROBERT A. FORLIZZO, Authorized Agent of Membr

STATE OF FLORIDA)
COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me this <u>Jack</u> day of <u>February</u>, 2006, by ROBERT A. FORLIZZO, Authorized Agent of Member. He is personally known to me.

Notary Public State of Florida

My Commission Expires:



CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

THE DISC INSTITUTE OF SAINT PETERSBURG, LLC

2. The name and address of the Registered Agent and Office is:

ROBERT A. FORLIZZO, ESQ. 2903 Rigsby Lane Safety Harbor, FL 34695

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.

ROBERT A. FORLIZZO