

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

L06000074769  
FILED 8:00 AM  
July 28, 2006  
Sec. Of State  
mthomas

**Article I**

The name of the Limited Liability Company is:

DYSLEXIA INSTITUTE OF CENTRAL FLORIDA, LLC

**Article II**

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

1850 NORTH ALAFAYA TRAIL  
SUITE 1A  
ORLANDO, FL. 32826

The mailing address of the Limited Liability Company is:

1850 NORTH ALAFAYA TRAIL  
SUITE 1A  
ORLANDO, FL. 32826

**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:

CARMEN HERNANDEZ  
4934 TERRA VISTA WAY  
ORLANDO, FL. 32837

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: CARMEN HERNANDEZ

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
ROSA EQUILIN  
1850 NORTH ALAFAYA TRAIL, SUITE 1A  
ORLANDO, FL. 32801 US

Title: MGRM  
CARMEN HERNANDEZ  
1850 NORTH ALAFAYA TRAIL, SUITE 1A  
ORLANDO, FL. 32801 US

### **Article VI**

The effective date for this Limited Liability Company shall be:

07/28/2006

Signature of member or an authorized representative of a member

Signature: ROSA ESQUILIN

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