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FLORIDA/FOREIGN LIMITED LIABILITY CO.

CORDERO CHIROPRACTIC & ASSOCIATES, L.L.C.

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September 15, 2006

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

GM FINANCIAL GROUP

SUBJECT: CORDERO CHIROPRACTIC & ASSOCIATES, L.L.C.  
REF: W06000040630

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet:

The designation of the registered agent must be at a Florida street address.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Tammi Cline  
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Articles of Organization  
of

**CORDERO CHIROPRACTIC &  
ASSOCIATES, L.L.C.**

a Florida Limited Liability Company

The undersigned organizer(s) for the purpose of forming a Limited Liability Company under  
the Florida Business Corporation Act, hereby adopt(s) the following Articles of Organization.

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**ARTICLE I - NAME**

The name of the limited liability company shall be:

**CORDERO CHIROPRACTIC & ASSOCIATES, L.L.C.**

**ARTICLE II - PRINCIPAL OFFICE**

The principal place of business and mailing address of the limited liability company shall be:

650 ROYAL PALM BEACH BLVD SUITE 7  
ROYAL PAM BEACH, FL 33441

Mailing address: P.O. Box 1273  
Loxahatchee, FL 33470

Filer:  
GM Financial Group Limited, Inc.  
c/o Barbara Klupt  
1191 E. Newport Center Drive  
Suite 103  
Deerfield Beach, FL 33442  
(954) 428-8899  
(954)428-6699 Fax

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**ARTICLE III - Registered Agent**

The name and address of registered agent is:

DEBRA CORDERO  
650 ROYAL PALM BEACH BLVD  
SUITE 7  
ROYAL PALM BEACH, FL 33441

Having been named as registered agent and to accept service of process for the above 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 as provided for in Chapter 608, F.S.

**ARTICLE IV - Name and Address of Manager (S)**

Title: \_\_\_\_\_ Name and Address: \_\_\_\_\_

"MGR'S"  
EDWIN CORDERO, P.A. 50%  
JOHN TERRANOVA, P.A. 50%  
P.O. BOX 1273  
LOXAHATCHEE, FL 33470

**ARTICLE V - AMENDMENTS**

The limited liability company reserves the right to amend, alter, change, or repeal any provision in these Articles of Organization, or in any amendment hereto, or to add any provision to these Articles of Organization or to any amendment hereto, in any manner now or hereafter prescribed or permitted by the provisions of any applicable statute of the State of Florida, and all rights conferred upon manager(s) in these Articles or any amendment hereto are granted subject to this reservation.

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GMFINGROUP KGA ASSOC

DOORDERO

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TO: 15615330224

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#### ARTICLE VI - PURPOSES

Business Purpose: CHIROPRACTIC SERVICES

#### ARTICLE VI - POWERS OF LIMITED LIABILITY COMPANY

The Limited Liability Company shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Organization.

#### ARTICLE VII - TERM OF EXISTENCE

This limited liability company shall have perpetual existence.

#### ARTICLE VII - EFFECTIVE DATE

These Articles of Organization shall be effective immediately upon approval of the Secretary of State, State of Florida.

THE UNDERSIGNED Manager, for the purpose of forming a limited liability company

under the laws of the State of Florida, has executed these Articles of Organization on this

13 day of September, 2006.

EDWIN CORDERO, P.A.

JOHN TERRANOVA, P.A.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 608.407, Florida Statutes, the undersigned limited liability company organized under the laws of the State of Florida, 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:

**CORDERO CHIROPRACTIC & ASSOCIATES, L.L.C.**

2. The registered agent and office is:

DEBRA CORDERO  
650 Royal Palm Beach Blvd., Suite 7  
Royal Palm Beach, FL 33441

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 accepted 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.

Debra Cordero  
DEBRA CORDERO

9/13/06  
Date

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