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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Prom:

Account Name : MCCARTHY, SUMMERS, BOBKO, WOOD, SAWYER & PERFY,

Account Number : I19990000170

Phone : (772)286-1700

Fax Number : (772)283-1803

FLORIDA/FOREIGN LIMITED LIABILITY CO.

A BETTER WAY TO HEALTH, LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A BETTER WAY TO HEALTH, LLC

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall:

Continue until December 31, 2056, unless sooner terminated by operation of law or in accordance with the Regulations of the Limited Liability Company, or as reestablished after such primary term for such additional period as is determined by the Members.

ARTICLE III - Address:

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

1801 SE Hillmoor Drive, Suite A104, Port St. Lucie, FL 34952

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

1801 SE Hillmoor Drive, Suite A104, Port St. Lucie, FL 34952

ARTICLE IV - Registered Agent/Address

The name and address of the registered agent is:

Kenneth A. Norman 2400 S.E. Federal Highway, Fourth Floor Stuart, Florida 34994

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A BETTER WAY TO HEALTH, LLC

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ARTICLE V - Additional Members

Additional Members may be admitted to the Limited Liability Company upon the unanimous vote of the Limited Liability Company's members.

ARTICLE VI - Continuation of Business

Upon the withdrawal of a Member, the remaining members owning at least sixty-six and two-thirds percent (66 2/3rd%) of the interests in the Limited Liability Company then owned by all remaining Members (by written consent of each of such Members) may elect to continue the business.

ARTICLE VII - Management:

The Limited Liability Company is to be managed by a Manager and is therefore a manager-managed company. The name and address of the initial Manager is:

> Stuart S. Shipe, D.O.M. 1801 SE Hillmoor Drive, Suite A104 Port St. Lucie, FL 34952

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Articles of Organization A BETTER WAY TO HEALTH, LLC

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, 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: A BETTER WAY TO HEALTH, LLC
- 2. The name and address of the registered agent and office is:

Kenneth A. Norman (Name)

2400 S.E. Federal Highway

Fourth Floor (P.O. Box not acceptable)

Stuart, Florida 34994 (City/State/Zip)

Having been named as registered agent and to accept service of process for the above still limited liability company at the place designated in this certificate, Kenneth A. Norman hereby accepts the appointment as registered agent and agrees to act in this capacity. Kenneth A. Norman further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and it is familiar with and accepts the obligations of its position as registered agent.

Dated: () (+ , 2006

REGISTERED AGENT:

Képneth A. Norman

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