

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

L06000117557  
FILED 8:00 AM  
December 11, 2006  
Sec. Of State  
jbryan

**Article I**

The name of the Limited Liability Company is:

A.T.P. THERAPIES, LLC

**Article II**

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

8023 NW 31ST AVENUE  
APT G-40  
GAINESVILLE, FL. 32606

The mailing address of the Limited Liability Company is:

8023 NW 31ST AVENUE  
APT G-40  
GAINESVILLE, FL. 32606

**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:

AARON PALMER  
8023 NW 31ST AVENUE  
APT G-40  
GAINESVILLE, FL. 32606

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: AARON PALMER

## **Article V**

The name and address of managing members/managers are:

Title: MGRM  
AARON PALMER  
8023 NW 31ST AVENUE  
GAINESVILLE, FL. 32606

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Signature of member or an authorized representative of a member

Signature: NEIL ROSIN