

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

L07000001651
FILED 8:00 AM
December 29, 2006
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

BODY WORKS MASSAGE CLINIC, LLC

Article II

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

995 N. STATE ROAD 434
304
ALTAMONTE SPRINGS, FL. 32714

The mailing address of the Limited Liability Company is:

4732 FALLING ACORN CIRCLE
LAKE MARY, FL. 32746

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:

DAVID S COHEN ESQ
5728 MAJOR BOULEVARD
SUITE 550
ORLANDO, FL. 32819

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: DAVID S. COHEN

Article V

The name and address of managing members/managers are:

Title: MGRM
ANDREW FINK
4732 FALLING ACORN CIRCLE
LAKE MARY, FL. 32746

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Signature of member or an authorized representative of a member

Signature: DAVID S. COHEN