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To:

Division of Corporations

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From:

: HARPER, KYNES, GELLER & BUFORD Account Name

Account Number : 070651000745 (727) 799-4840 Phone (727) 797-8206 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO

Vogelbacher Therapy, LLC

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Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: Vogelbacher Therapy, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 9518 Harpender Way, Tampa, FL 33626.

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Pierre M. Vogelbacher 9518 Harpender Way Tampa, FL 33626

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 as provided for in Chapter 608, F.S.

Pierre M. Vogelbacher, Registered Agent

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company.

ARTICLE V - MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Manager

Tonya Vogelbacher)9518 Harpender Way Tampa, FL 33626

Pierre M. Vogelbacher Representative

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Pierre M. Vogelbacher

Typed or printed name of signee