# Electronic Articles of Organization For Florida Limited Liability Company

L07000078193 FILED 8:00 AM July 31, 2007 Sec. Of State btadlock

# **Article I**

The name of the Limited Liability Company is: ALLPHYSIO THERAPY SERVICES, LLC

### **Article II**

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

1004 VENETIAN AVENUE ORLANDO, FL. 32804

The mailing address of the Limited Liability Company is:

11047 FAIRHAVEN WAY ORLANDO, FL. 32825

# **Article III**

The purpose for which this Limited Liability Company is organized is:

PHYSICAL THERAPY, OCCUPATIONAL THERAPY, SPEECH THERAPY, MASSAGE THERAPY, CRANIOSACRAL THERAPY AND COUSELING SERVICES

#### **Article IV**

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

CLAUDIA M SILVA 11047 FAIRHAVEN WAY ORLANDO, FL. 32825

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: CLAUDIA M SILVA

# **Article V**

The name and address of managing members/managers are:

Title: MGRM CLAUDIA M SILVA 11047 FAIRHAVEN WAY ORLANDO, FL. 32825

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# **Article VI**

The effective date for this Limited Liability Company shall be: 08/01/2007

Signature of member or an authorized representative of a member Signature: CLAUDIA M SILVA