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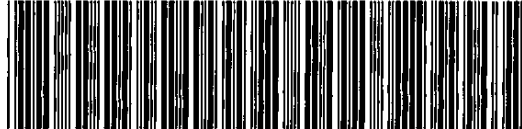
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Effective Date 08/27/07

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DIVISION OF CORPORATIONS
07 SEP -4 AM 10:42



John Uustal, CFP
Cathie Uustal Tedesco, CFP
Thomas J. Tedesco, Jr., CPA, JD

August 29, 2007

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Organization of New Life Chiropractic Center, L.L.C.

Dear Sir/Madam:

Please be advised that the information for the above referenced entity is as follows:

Name of Entity:	New Life Chiropractic Center, L.L.C.	
Address of Corporation	720 SW 124 th Terrace Ft. Lauderdale, FL 33325	
Managing Members:	Thomas Fiore 720 SW 124 th Terrace Ft. Lauderdale, FL 33325	Dr. Vanessa K. Shields 720 SW 124 th Terrace Ft. Lauderdale, FL 33325
Registered Agent:	Dr. Vanessa K. Shields	
Daytime Phone No:	954-829-4322	

I have enclosed the original and one copy of the Articles of Organization along with a check in the amount of \$125.00 for the filing fee.

If you should require anything further, please do not hesitate to contact me.

Very truly yours,

Thomas J. Tedesco, Jr., CPA, JD

Enclosures

Effective Date 08/27/07

**ARTICLES OF ORGANIZATION
FOR
NEW LIFE CHIROPRACTIC CENTER, L.L.C.**

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**ARTICLE I
Name**

The name of the Limited Liability Company is NEW LIFE CHIROPRACTIC CENTER, L.L.C.

**ARTICLE II
Address**

The mailing address and street address of the principal office of the Limited Liability Company is: 720 SW 124th Terrace, Fort Lauderdale, FL 33325.

**ARTICLE III
Duration**

This period of duration for the Limited Liability Company shall be: PERPETUAL.

**ARTICLE IV
Purpose**

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated under the Florida Limited Liability Company Act.

**ARTICLE V
Registered Agent**

The street address of the initial registered office of the Limited Liability Company shall be 720 SW 124th Terrace, Fort Lauderdale, FL 33325 and the name of the initial registered agent of the Limited Liability Company at that address is DR. VANESSA K. SHIELDS.

Shields

ARTICLE VI

Management

The Limited Liability Company is to be managed by TWO (2) managers and the name and the address of the managers are:

Name	Address
THOMAS P. FIORE:	720 SW 124 th Terrace, Fort Lauderdale, FL 33325
DR. VANESSA K SHIELDS:	720 SW 124 th Terrace, Fort Lauderdale, FL 33325

ARTICLE VII

Effective Date

Pursuant to Florida Statute Section 608.409, the Limited Liability Company's existence shall be effective as of August 27, 2007 which is within five (5) business days prior to the date these Articles of Organization are filed with the Department of State.

The undersigned authorized representative of NEW LIFE CHIROPRACTIC CENTER, L.L.C., hereby executes these articles of organization on this 27th day of August, 2007.


DR. VANESSA K. SHIELDS


THOMAS P. FIORE

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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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: NEW LIFE CHIROPRACTIC CENTER, L.L.C.
2. The name and the Florida street address of the registered agent and office are:

DR. VANESSA K. SHIELDS
NEW LIFE CHIROPRACTIC CENTER, L.L.C.
720 SW 124th Terrace
Fort Lauderdale, FL 33325.

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.


DR. VANESSA K. SHIELDS

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