

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

L07000100989
FILED 8:00 AM
October 04, 2007
Sec. Of State
gmcleod

Article I

The name of the Limited Liability Company is:
NUTRITION PHYSICIAN LLC

Article II

The street address of the principal office of the Limited Liability Company is:
1500 NE 4TH AVENUE
BOCA RATON, FL. 33432

The mailing address of the Limited Liability Company is:
1500 NE 4TH AVENUE
BOCA RATON, FL. 33432

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:
AMALE G ANDERSON
1500 NE 4TH AVENUE
BOCA RATON, FL. 33432

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: AMALE ANDERSON

Article V

The name and address of managing members/managers are:

Title: MGRM
ALLAN N SPREEN
6446-45 EAST TRAILRIDGE CIRCLE
MESA, AZ. 85215

Title: MGRM
AMALE G ANDERSON
1500 NE 4TH AVENUE
BOCA RATON, FL. 33432

L07000100989
FILED 8:00 AM
October 04, 2007
Sec. Of State
gmcleod

Article VI

The effective date for this Limited Liability Company shall be:

10/03/2007

Signature of member or an authorized representative of a member

Signature: AMALE ANDERSON