# Electronic Articles of Organization For Florida Limited Liability Company

L07000108955 FILED 8:00 AM October 26, 2007 Sec. Of State jbryan

### Article I

The name of the Limited Liability Company is: CJ FAMILY CHIROPRACTIC CENTER, LLC

#### **Article II**

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

10509 MARSH STREET WELLINGTON, FL. 33414

The mailing address of the Limited Liability Company is:

10509 MARSH STREET WELLINGTON, FL. 33414

### **Article III**

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

TO PROMOTE AND DELIVER BEST CHIROPRACTIC HEALTHCARE IN THE COMMUNITY

#### **Article IV**

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

CLAUDIUS ALCIME DC 10509 MARSH STREET WELLINGTON, FL. 33414

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: DR. CLAUDIUS ALCIME

## **Article V**

The name and address of managing members/managers are:

Title: MGR CLAUDIUS ALCIME DC 10509 MARSH STREET WELLINGTON, FL. 33414 L07000108955 FILED 8:00 AM October 26, 2007 Sec. Of State jbryan

## **Article VI**

The effective date for this Limited Liability Company shall be: 11/01/2007

Signature of member or an authorized representative of a member Signature: DR. CLAUDIUS ALCIME