

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

L08000003016
FILED 8:00 AM
January 08, 2008
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:
COVE CENTER FOR RECOVERY, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
2366 N.W. 32ND STREET
BOCA RATON, FL. 33431

The mailing address of the Limited Liability Company is:
2366 N.W. 32ND STREET
BOCA RATON, FL. 33431

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:
LISA BRADEN
4623 FOREST HILL BLVD
WEST PALM BEACH, FL. 33415

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: LISA BRADEN

Article V

The name and address of managing members/managers are:

Title: MGR
CHRISTOPHER WALSH
2366 N.W. 32ND STREET
BOCA RATON, FL. 33431

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Signature of member or an authorized representative of a member

Signature: LISA BRADEN