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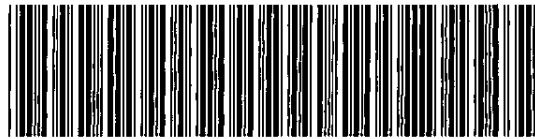
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EFFECTIVE DATE 5-1-08



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY -1 PM 3:10

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D. BRUCE

MAY 02 2008

EXAMINER

Nicholas T. Schroeder
Attorney at Law
4010-D Newberry Road
Gainesville, Florida 32607

352-376-8118

April 29, 2008

Florida Secretary of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

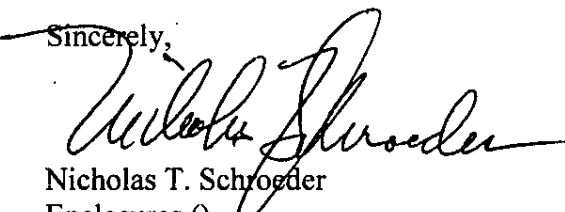
Re: *Registration of GREEN APPLE THERAPY, LLC*

Enclosed are the following:

1. Two copies Articles of Organization
2. Check #4108 for \$125.00 Filing Fee

Please file the Registration and return a copy to this office, thank you for your services.

Sincerely,


Nicholas T. Schroeder
Enclosures ()

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08 MAY -1 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Organization of GREEN APPLE THERAPY, LLC

A Florida Limited Liability Company

The undersigned subscribe to these Articles of Organization to form a limited liability company (the "company") under the Florida Limited Liability Company Act (Chapter 608, Florida Statutes).

1. Name of the Limited Liability Company. The name of the limited liability company is GREEN APPLE THERAPY, LLC.

2. Principal Office. The mailing address and the street address of the limit liability company is:

GREEN APPLE THERAPY, LLC
23005 NW 11th Road
Newberry, FL 32669

3. Effective Date. The effective date of the LLC shall be May 1, 2008.

4. Purpose and Nature of Business. The nature of the business to be transacted and which the LLC is authorized to transact, in addition to those authorized by the laws of the State of Florida, and the powers of the LLC, shall be to engage in any activity or business authorized under Florida Statutes.

5. Registered Agent. The name of the initial resident agent of the company, the address of the initial registered office of the Company is:

KATHLEEN R. SHEPARD
23005 NW 11th Road
Newberry, FL 32669

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08 MAY - 1 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 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.


KATHLEEN R. SHEPARD

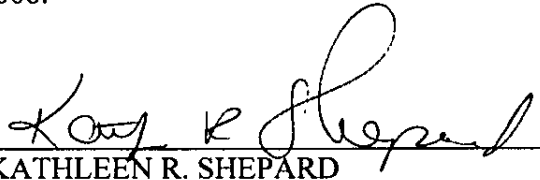
EFFECTIVE DATE 5-1-08

6. Amendment. These Articles of Organization may be amended in the manner provided in the Operating Agreement of the Company.

7. Management. The manager of the limited liability company is:

KATHLEEN R. SHEPARD
23005 NW 11th Road
Newberry, FL 32669

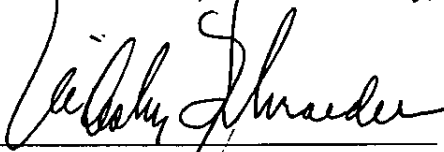
In witness whereof, the undersigned has executed these Articles of Organization this 29 day of April, 2008.



KATHLEEN R. SHEPARD

STATE OF FLORIDA
COUNTY OF ALACHUA

Personally appeared before me, the undersigned authority, KATHLEEN R. SHEPARD, being well known or identified by her Florida Driver's License, and who did take an oath, acknowledged before me that she is a party to the foregoing Articles of Organization, and further acknowledges that the facts stated therein are true.

WITNESS, my hand and official seal at Gainesville, Alachua County, Florida, this 29 day of April, 2008.


Notary Public
My commission expires:

NOTARY PUBLIC-STATE OF FLORIDA
 Nicholas T. Schroeder
Commission # DD495379
Expires: DEC. 12, 2009
Bonded Thru Atlantic Bonding Co., Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA