

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

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FILED 8:00 AM
May 21, 2008
Sec. Of State
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Article I

The name of the Limited Liability Company is:
FAMILY CHIROPRACTIC OF HAINES CITY, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:
1015 JONES AVENUE
HAINE CITY, FL. 33844

The mailing address of the Limited Liability Company is:
P.O. BOX 1302
VALRICO, FL. 33595

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:
LINDA RICH-CONSIGLIO
1128 LUMSDEN TRACE CIRCLE
VALRICO, FL. 33594

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: LINDA RICH-CONSIGLIO

Article V

The name and address of managing members/managers are:

Title: MGRM
LINDA RICH-CONSIGLIO
1128 LUMSDEN TRACE CIRCLE
VALRICO, FL. 33594

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Article VI

The effective date for this Limited Liability Company shall be:

05/19/2008

Signature of member or an authorized representative of a member

Signature: LINDA RICH-CONSIGLIO