

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

L08000090611  
FILED 8:00 AM  
September 23, 2008  
Sec. Of State  
mthomas

**Article I**

The name of the Limited Liability Company is:  
VILFORT CHIROPRACTIC,LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
7418 COMMERCE STREET  
RIVERVIEW, FL. 33578

The mailing address of the Limited Liability Company is:  
PO BOX 46036  
TAMPA, FL. 33646

**Article III**

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

**Article IV**

The name and Florida street address of the registered agent is:  
CARLINE M VILFORT DC  
18101 BRIDLE BIT LN  
TAMPA, FL. 33647

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: CARLINE VILFORT,DC

### **Article V**

The name and address of managing members/managers are:

Title: MGM  
CARLINE M VILFORT DC  
18101 BRIDLE BIT LN  
TAMPA, FL. 33647

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### **Article VI**

The effective date for this Limited Liability Company shall be:

09/22/2008

Signature of member or an authorized representative of a member

Signature: CARLINE VILFORT