

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

L08000108973
FILED 8:00 AM
November 24, 2008
Sec. Of State
btadlock

Article I

The name of the Limited Liability Company is:
ALTAMONTE PAIN RELIEF CENTER, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
652 PALM SPRINGS DRIVE
ALTAMONTE SPRINGS, FL. 32750

The mailing address of the Limited Liability Company is:
1960 BRIDGEWATER DRIVE
WINTER PARK, FL. 32792

Article III

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

Article IV

The name and Florida street address of the registered agent is:
BELINDA STRATTON
132 BENMORE DRIVE
WINTER PARK, FL. 32792

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: BELINDA STRATTON

Article V

The name and address of managing members/managers are:

Title: MGR
MATTHEW MOUNTAIN DC
777 DELTONA BLVD #21
DELTONA, FL. 32725

Title: MGR
ENRIQUE UMPIERRE MD
777 DELTONA BLVD #21
DELTONA, FL. 32725

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Article VI

The effective date for this Limited Liability Company shall be:

11/24/2008

Signature of member or an authorized representative of a member

Signature: BELINDA STRATTON