

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

L09000019342
FILED 8:00 AM
February 26, 2009
Sec. Of State
clewis

Article I

The name of the Limited Liability Company is:

INSTITUTE FOR BRAIN TRAUMA, HEALING AND EMPOWERMENT,
LLC

Article II

The street address of the principal office of the Limited Liability Company is:

1954 HOWELL BRANCH RD
106
WINTER PARK, FL. 32792

The mailing address of the Limited Liability Company is:

1954 HOWELL BRANCH RD
106
WINTER PARK, FL. 32792

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:

MARCIE S CRAMER
1954 HOWELL BRANCH RD
106
WINTER PARK, FL. FL

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: MARCIE S. CRAMER

Article V

The name and address of managing members/managers are:

Title: MGRM
MARCIE S CRAMER
1954 HOWELL BRANCH RD STE 106
WINTER PARK, FL. 32792

Title: MGRM
MARILYN COBB
1954 HOWELL BRANCH RD STE 106
WINTER PARK, FL. 32792

Title: MGRM
JEFFERY REICH
1954 HOWELL BRANCH RD SUITE 106
WINTER PARK, FL. 32792

Article VI

The effective date for this Limited Liability Company shall be:

02/25/2009

Signature of member or an authorized representative of a member

Signature: MARCIE S. CRAMER

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