Electronic Articles of Organization
For
Florida Limited Liability Company

L09000036552
FILED 8:00 AM
April 15, 2009
Sec. Of State
dbruce

Article I

The name of the Limited Liability Company is:

CLEWISTON MEDICAL & PAIN RELIEF CENTERS, LLC

Article II

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

114 W VENTURA AVE
CLEWISTON, FL. US 33440

The mailing address of the Limited Liability Company is:

114 W VENTURA AVE
CLEWISTON, FL. US 33440

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:

FRITZ EDOUARD
114 W VENTURA AVE
CLEWISTON, FL. 33440

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: FRITZ EDOUARD

L09000036552
FILED 8:00 AM
April 15, 2009
Sec. Of State
dbruce

Article V

The name and address of managing members/managers are:

Title: MGR
FRITZ EDOUARD
114 W VENTURA AVE
CLEWISTON, FL. 33440 US

Title: MGR
JEAN E MARCELUS
114 W VENTURA AVE
CLEWISTON, FL. 33440 US

Title: MGR
JOSELYN J CADET
114 W VENTURA AVE
CLEWISTON, FL. 33440 US

Article VI

The effective date for this Limited Liability Company shall be:

04/15/2009

Signature of member or an authorized representative of a member

Signature: FRITZ EDOUARD