

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

L09000099799
FILED 8:00 AM
October 15, 2009
Sec. Of State
gmcleod

Article I

The name of the Limited Liability Company is:
ORLANDO SOUTH CHIROPRACTIC LLC

Article II

The street address of the principal office of the Limited Liability Company is:
773 S KIRKMAN RD
118
ORLANDO, FL. 32811

The mailing address of the Limited Liability Company is:
773 S KIRKMAN RD
118
ORLANDO, FL. 32811

Article III

The purpose for which this Limited Liability Company is organized is:
DOCTOR CHIROPRACTIC OFFICE& REHAB CENTER AND ANY LAWFUL
PURPOSE.

Article IV

The name and Florida street address of the registered agent is:
COHEN ROBERT
773 S KIRKMAN RD
118
ORLANDO, FL. 32811

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: COHEN ROBERT

Article V

The name and address of managing members/managers are:

Title: MGR
ROBERT COHEN
773 S KIRKMAN RD SUITE 118
ORLANDO, FL. 32811

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Article VI

The effective date for this Limited Liability Company shall be:

10/15/2009

Signature of member or an authorized representative of a member

Signature: COHEN ROBERT