

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

L09000107610
FILED 8:00 AM
November 09, 2009
Sec. Of State
mthomas

Article I

The name of the Limited Liability Company is:

KATHLEEN LEAVY RN, AP, LLC

Article II

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

802 N.W. 23 AVE.
GAINESVILLE, FL. US 32641

The mailing address of the Limited Liability Company is:

802 N.W. 23 AVE.
GAINESVILLE, FL. US 32641

Article III

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

TREATING AND TEACHING ORIENTAL MEDICINE

Article IV

The name and Florida street address of the registered agent is:

KATHLEEN LEAVY
3327 S.E. 30 PL
GAINESVILLE, FL. 32641

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: KATHLEEN LEAVY

Article V

The name and address of managing members/managers are:

Title: MGRM
KATHLEEN LEAVY
3327 S.E. 30 PL
GAINESVILLE, FL. 32641 US

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Signature of member or an authorized representative of a member

Signature: KATHLEEN LEAVY