Electronic Articles of Organization For Florida Limited Liability Company

L10000002436 FILED 8:00 AM January 07, 2010 Sec. Of State thampton

Article I

The name of the Limited Liability Company is:

FOWLER MANAGEMENT CHIROPRACTIC AND REHAB, LLC

Article II

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

6124 SANDCREST CIRCLE ORLANDO, FL. 32819

The mailing address of the Limited Liability Company is:

6124 SANDCREST CIRCLE ORLANDO, FL. 32819

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:

JEAN CASY 6124 SANDCREST CIRCLE ORLANDO, FL. 32819

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: JEAN CASY

Article V

The name and address of managing members/managers are:

Title: MGR JEAN CASY 6124 SANDCREST CIRCLE ORLANDO, FL. 32819 L10000002436 FILED 8:00 AM January 07, 2010 Sec. Of State thampton

Article VI

The effective date for this Limited Liability Company shall be: 01/07/2010

Signature of member or an authorized representative of a member Signature: JEAN CASY