

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

L10000006747  
FILED 8:00 AM  
January 19, 2010  
Sec. Of State  
ncausseaux

**Article I**

The name of the Limited Liability Company is:  
SUPERIOR PAIN THERAPY EQUIPMENT. LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
1492 ALTERNATE 19 N  
PALM HARBOR, FL. 34683

The mailing address of the Limited Liability Company is:  
1492 ALTERNATE 19 N  
PALM HARBOR, FL. 34683

**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:  
MICHAEL S VINCENT  
7241 GABERIA RD  
NEW PORT RICHEY, FL. 34655

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: MICHAEL S VINCENT

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
MICHAEL S VINCENT  
7241 GABERIA RD  
NEW PORT RICHEY, FL. 34655

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### **Article VI**

The effective date for this Limited Liability Company shall be:

01/19/2010

Signature of member or an authorized representative of a member

Signature: MICHAEL S VINCENT