

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

L10000015601
FILED 8:00 AM
February 10, 2010
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

INSTITUTE OF LIFE AND WELLNESS, LLC

Article II

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

1683 CAMPBELL STREET
NORTH PORT, FL. US 34288

The mailing address of the Limited Liability Company is:

1683 CAMPBELL STREET
NORTH PORT, FL. US 34288

Article III

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

THE AIM OF THE INSTITUTE OF LIFE AND WELLNESS, LLC IS TO
DEVELOP AND IMPLEMENT MENTAL HEALTH PROGRAMS AND SERVICES
TO ADDRESS THE DIVERSE NEEDS OF THE UNDER-SERVED OR POORLY
SERVED.

Article IV

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

TIESHA S NELSON PSY.D.
1683 CAMPBELL STREET
NORTH PORT, FL. 34288

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: TIESHA NELSON, PSY.D.

Article V

The name and address of managing members/managers are:

Title: MGR
TIESHA S NELSON PSY.D.
1683 CAMPBELL STREET
NORTH PORT, FL. 34288 US

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Article VI

The effective date for this Limited Liability Company shall be:

02/09/2010

Signature of member or an authorized representative of a member

Signature: TIESHA NELSON, PSY.D.