

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

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Sec. Of State  
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**Article I**

The name of the Limited Liability Company is:  
DS PHYSICAL THERAPY,LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
2224 ENSENADA TERRACE  
WESTON, FL. BR 33327

The mailing address of the Limited Liability Company is:  
2224 ENSENADA TERRACE  
WESTON, FL. BR 33327

**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:  
DAVID D SRDIC  
2224 ENSENADA TERRACE  
WESTON, FL. 33327

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: DAVID D.SRDIC

**Article V**

The effective date for this Limited Liability Company shall be:  
03/11/2010

Signature of member or an authorized representative of a member  
Signature: DAVID D.SRDIC