Electronic Articles of Organization
For
Florida Limited Liability Company

L10000090133
FILED 8:00 AM
August 27, 2010
Sec. Of State
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Article I

The name of the Limited Liability Company is:

REHABQUEST THERAPY SERVICES, LLC

Article II

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

8911 NORTH RIVER ROAD
TAMPA, FL. US 33635

The mailing address of the Limited Liability Company is:

8911 NORTH RIVER ROAD
TAMPA, FL. US 33635

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:

ADONIS P DELA CRUZ
8911 NORTH RIVER ROAD
TAMPA, FL. 33635

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: ADONIS DELA CRUZ

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Article V

The name and address of managing members/managers are:

Title: MGR
ADONIS P DELA CRUZ
8911 NORTH RIVER ROAD
TAMPA, FL. 33635 US

Title: MGRM
LENIE V DELA CRUZ
8911 NORTH RIVER ROAD
TAMPA, FL. 33635 US

Article VI

The effective date for this Limited Liability Company shall be:

08/27/2010

Signature of member or an authorized representative of a member

Signature: ADONIS DELA CRUZ