

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

L10000095006  
FILED 8:00 AM  
September 10, 2010  
Sec. Of State  
clewis

**Article I**

The name of the Limited Liability Company is:

HEALTHCARE PERFORMANCE SLEEP RESOURCES LLC

**Article II**

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

3471 NORTH FEDERAL HIGHWAY  
SUITE #506  
FORT LAUDERDALE, FL. 33306

The mailing address of the Limited Liability Company is:

3471 NORTH FEDERAL HIGHWAY  
SUITE #506  
FORT LAUDERDALE, FL. 33306

**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:

KEVIN REYNOLDS CPA  
2401 NW BOCA RATON BOULEVARD  
BOCA RATON, FL. 33431

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: KEVIN REYNOLDS

## Article V

The name and address of managing members/managers are:

Title: MGR  
ANTHONY ALTMANN  
3471 NORTH FEDERAL HIGHWAY SUITE# 506  
FT LAUDERDALE, FL. 33306 US

Title: MGR  
RICHARD MELI MD  
3471 NORTH FEDERAL HWY SUITE# 506  
FT LAUDERDALE, FL. 33306 US

Title: MGR  
JOHN HARTER  
3471 NORTH FEDERAL HWY SUITE# 506  
FT LAUDERDALE, FL. 33306 US

Title: MGR  
WILLIAM STAMER  
3471 NORTH FEDERAL HWY SUITE# 506  
FT LAUDERDALE, FL. 33306 US

Signature of member or an authorized representative of a member

Signature: ANTHONY ALTMANN

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