

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

L10000107207  
FILED 8:00 AM  
October 13, 2010  
Sec. Of State  
nculligan

**Article I**

The name of the Limited Liability Company is:

LYMPHACARE THERAPY PLLC

**Article II**

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

17543 NW 22ND AVE.  
MIAMI, FL. US 33056

The mailing address of the Limited Liability Company is:

17543 NW 22ND AVE.  
MIAMI, FL. US 33056

**Article III**

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

OCCUPATIONAL PHYSICAL THERAPY

**Article IV**

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A  
TAMPA, FL. 33612

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: SANDRA BRYANT, US CORP. AGENTS

## **Article V**

The name and address of managing members/managers are:

Title: MGRM  
ABRAHAM JOACHIN  
17543 NW 22ND AVE.  
MIAMI, FL. 33056 US

Title: MGRM  
SIERRA JOACHIN  
17543 NW 22ND AVE.  
MIAMI, FL. 33056 US

Signature of member or an authorized representative of a member

Signature: ABRAHAM JOACHIN

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