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FLORIDA LIMITED LIABILITY CO.
KCT REHABILITATIVE SERVICES, LLC.

Certificate of Status	0
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ARTICLES OF ORGANIZATION
OF
KCT REHABILITATIVE SERVICES, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company shall be:

KCT REHABILITATIVE SERVICES, LLC.

ARTICLE II - ADDRESS

The mailing address P.O. Box 833, Hobe Sound, FL 33475 and street address of the principal office of the Limited Liability Company is: 3162 Commodore Plaza, Unit 3A/B, Coconut Grove, FL 33133.

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ARTICLE III - PURPOSE

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

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV - REGISTERED AGENT
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and street address of the initial registered agent are:

Giorgio L. Ramirez, Esq.
3162 Commodore Plaza, Unit 3A/B
Coconut Grove, FL 33133

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 as provided for in Chapter 608, F.S..

Registered Agent's Signature

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ARTICLE V - MANAGER OR MANAGING MEMBER(S)

The name and address of each Manager or Managing Member is as follows:

MGRM Tonise Florexil
P.O. Box 833
Hobe Sound, FL 33475

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Tonise Florexil

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