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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

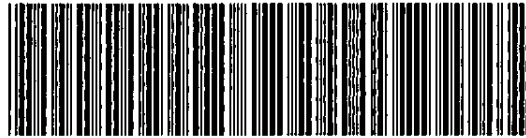
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

NOV 28 2011

EXAMINER

SHEPPARD, BRETT, STEWART, HERSCH, KINSEY & HILL, P.A.

**ATTORNEYS AT LAW
FIRM ESTABLISHED 1924**

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* BOARD CERTIFIED WILLS, TRUSTS & ESTATES
** BOARD CERTIFIED EMERITUS WILLS, TRUSTS & ESTATES
^ CERTIFIED PUBLIC ACCOUNTANT (FL)
+ ALSO ADMITTED IN IOWA

JOHN K. WOOLSLAIR (1908-1968)
W.A. SHEPPARD (1898-1971)

November 22, 2011

Corporate Records Bureau
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32301

RE: HEALTHSTORY PRODUCTIONS, LLC

Dear Sirs:

Enclosed herewith are proposed Articles of Organization in reference to the captioned Limited Liability Company for filing with the State. Also enclosed is our check in the amount of \$130.00 to cover the following:

Filing Fee	\$ 100.00
Resident Agent Fee	25.00
Certified Copy	30.00
Certificate of Status	<u>5.00</u>
	\$ 160.00

Please forward the Certificate of Statute for the undersigned at the address reflected above. Should you have any questions or comments, please do not hesitate to contact me.

Very truly yours,

SHEPPARD, BRETT, STEWART, HERSCH, KINSEY & HILL, P.A.



JAY A. BRETT

JAB:mp

Enclosures

cc: Dr. Johnathan W. Edwards

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF

HEALTHSTORY PRODUCTIONS, LLC
(Manager Managed)

The undersigned, for the purpose of forming a Limited Liability Company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I
NAME AND PRINCIPAL OFFICE

The name of the Limited Liability Company shall be HEALTHSTORY PRODUCTIONS, LLC ("Company"). The mailing address and principal office of the Company is: 2211 Santa Barbara Boulevard, Unit 107, Cape Coral, Florida 33991.

ARTICLE II
DURATION

The Company shall commence its existence upon the filing of these Articles of Organization, and its existence shall be perpetual unless the Company is dissolved as provided in these Articles of Organization.

ARTICLE III
PURPOSES AND POWERS

The general purpose for which the Company is organized is to operate a chiropractic clinic, and all activities associated therewith, and to conduct other activities incident to same. The Company shall also be authorized to transact any lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a Limited Liability Company under the laws of the State of Florida.

ARTICLE IV
REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is: Johnathan W. Edwards, 2211 Santa Barbara Boulevard, Unit 107, Cape Coral, Florida 33991.

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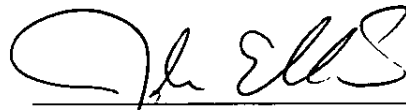
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ARTICLE V
MANAGEMENT

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Company shall be managed by a Manager in accordance with the Operating Agreement adopted from time to time by the members for the management of the business and affairs of the Company. Such Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with the law or these Articles of Organization.

IN WITNESS WHEREOF, the undersigned member has made and subscribed these Articles of Organization at Fort Myers, Florida, for the foregoing uses and purposes this 15 day of November, 2011.



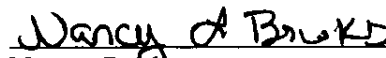
Johnathan W. Edwards

STATE OF ~~FLORIDA~~ ILLINOIS

COUNTY OF ~~LEE~~ WINNEBAGO

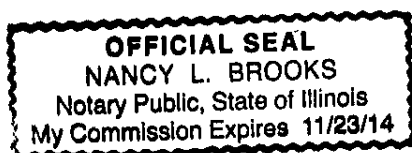
The foregoing instrument was acknowledged before me this 15th day of November, 2011, by Johnathan W. Edwards, who (☒) is personally known to me or () has produced _____ as identification.

(SEAL)
Comm. Expires
Comm. No.



Notary Public
Nancy L. Brooks

Printed Notary Signature




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ACCEPTANCE OF REGISTERED AGENT

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for HEALTHSTORY PRODUCTIONS, LLC, at the place designated herein, 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. I am familiar with and accept the obligations of my position as registered agent, as provided for in Chapter 608, Florida Statutes.



Johnathan W. Edwards

Date: November 15, 2011