

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

L12000022258
FILED 8:00 AM
February 15, 2012
Sec. Of State
kasaly

Article I

The name of the Limited Liability Company is:

ISLAND HEALING CHIROPRACTIC AND REHABILITATION
CENTER.LLC

Article II

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

2532 NORTH STATE RD 7
MARGATE, FL. 33063

The mailing address of the Limited Liability Company is:

2532 NORTH STATE RD 7
MARGATE, FL. 33063

Article III

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

CHIROPRACTIC OFFICE

Article IV

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

RENNEIL SHERMAN
5840 W SAMPLE RD
202
CORAL SPRINGS, FL. 33067

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: RENNEIL SHERMAN

Article V

The name and address of managing members/managers are:

Title: MGRM
RENNEIL SHERMAN
5840 W SAMPLE RD #202
CORAL SPRINGS, FL. 33067

Title: MGR
SHAUNA-GAYE SHERMAN
5840 W SAMPLE RD #202
CORAL SPRINGS, FL. 33067

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Signature of member or an authorized representative of a member

Electronic Signature: RENNEIL SHERMAN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.