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Florida Department of State
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
INTEGRATIVE HEALTH CENTER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 MAR 13 AM 8:01

J. Shivers MAR 14 2014

**ARTICLES OF ORGANIZATION
OF
INTEGRATIVE HEALTH CENTER, LLC**

ARTICLE I - NAME

The name of the limited liability company is: **INTEGRATIVE HEALTH CENTER, LLC**

ARTICLE II - ADDRESS

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

Principal Office Address:

13155 SW 42 ST, SUITE 111
MIAMI, FL 33175

Mailing Address:

13155 SW 42 ST, SUITE 111
MIAMI, FL 33175

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Félix M. Cáceres II, P.A.
1035 SW 87th Avenue
Miami, Florida 33174

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 605 F.S.

Félix M. Cáceres II, P.A.


By: Félix M. Cáceres II, President
Registered Agent

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TALLAHASSEE, FLORIDA

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

ELISA CALIMANO FERREIRA

13155 SW 42 ST, SUITE 111

MIAMI, FL 33175

ARTICLE V - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is therefore a manager-managed company.

ARTICLE VI - EFFECTIVE DATE

The effective date of the company shall be March 12, 2014.

REQUIRED SIGNATURE:



Signature of an authorized representative of a member.

(In accordance with section 605.0203 Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Félix M. Cáceres II, Esq.

Typed or printed name of signer

14 MAR 13 PM 8:31
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