

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

**L14000193039
FILED 8:00 AM
December 18, 2014
Sec. Of State
jdharris**

Article I

The name of the Limited Liability Company is:

PRIMA VISTA RECOVERY & WELLNESS CENTER LLC

Article II

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

7664 S US HWY 1
PORT ST LUCIE, FL. US 34952

The mailing address of the Limited Liability Company is:

7664 S US HWY 1
PORT ST LUCIE, FL. US 34952

Article III

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

GERALD A DIBARTOLOMEO JR
2222 COLONIAL RD
#200
FORT PIERCE, FL. 34950

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: GERALD A DIBARTOLOMEO JR

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
PASQUALE LAMARA
9501 RESERVE BLVD
POR ST LUCIE, FL. 34986 US

Title: MGR
JOANN FAILLA
9501 RESERVE BLVD
PORT ST LUCIE, FL. 34986 US

Title: MGR
JUAN ESCOBAR
7664 S US HWY 1
PORT ST LUCIE, FL. 34952 US

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Signature of member or an authorized representative

Electronic Signature: GERALD DIBARTOLOMEO

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.