

Division of Corporations

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Division of Corporations
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Account Number : 073222003555
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CHIRON RECOVERY CENTER, LLC**

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TALLAHASSEE, FLORIDA

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JUL 30 2015

S. YOUNG

**AMENDED AND RESTATED
ARTICLES OF ORGANIZATION
OF
CHIRON RECOVERY CENTER, LLC**

Pursuant to the provisions of Section 605, Florida Statutes, this Florida limited liability company submits the following to amend and restate its Articles of Organization:

- FIRST:** The name of the limited liability company is:
CHIRON RECOVERY CENTER, LLC.
- SECOND:** The limited liability company was registered with the Florida Department of State on May 5, 2015 and assigned Document No. L15000079559.
- THIRD:** The Articles of Organization are hereby amended and restated in their entirety to read:

**ARTICLE I
NAME**

The name of this Limited Liability Company is:

CHIRON RECOVERY CENTER, LLC

**ARTICLE II
ADDRESS**

The street address and mailing address of the principal office is:

2700 PGA Boulevard, Suite 203
Palm Beach Gardens, Florida 33410

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ARTICLE III
CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

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

Addiction Management, LLC
2700 PGA Boulevard, Suite 203
Palm Beach Gardens, Florida 33410

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.


Registered Agent:

ADDICTION MANAGEMENT, LLC



Michael Matte, its Manager

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 29 day of July, 2015.



Michael Matte, Authorized Representative of the
Members

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TALLAHASSEE, FLORIDA

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Registered Agent:

ADDICTION MANAGEMENT, LLC



Michael Matte, its Manager

ARTICLE IV

The name and address of managing members/managers are

Title: Member
Michael Matte
3911 N. Ocean Ave.
Singer Island, FL 33404

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 29th day of July, 2015.



Michael Matte, Authorized Representative of the Members