CAPITAL CÖNNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Dietz Chiropractic, Professional Association

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FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

October 9, 2002

CAPITAL CONNECTION, INC.

SUBJECT: DIETZ CHIROPRACTIC, P.A.

Ref. Number: W02000029226

We have received your document for DIETZ CHIROPRACTIC, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist
New Filing Section

Letter Number: 102A00056542

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

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ARTICLES OF ORGANIZATION FOR DIETZ CHIROPRACTIC, PROFESSIONAL ASSOCIATION

BY THIS INSTRUMENT, I, EDWARD R. DIETZ, JR., do hereby establish for the purpose of becoming a professional association, operating by and under the provisions of the statutes of Florida appertaining and providing for the formation, liabilities, rights, privileges as professional association, and do hereby make, subscribe, acknowledge and file these Articles of Organization for the purpose of becoming such a Professional Association and do hereby declare, state and certify:

ARTICLE I

The name of this professional association shall be:

DIETZ CHIROPRACTIC, PROFESSIONAL ASSOCIATION

SECRETARY OF SIMIL DIVISION OF CORPORATIONS

ARTICLE II

The street address and mailing address of the Professional Association's principal office is:

5812 Bee Ridge Road Sarasota, Florida 34233

ARTICLE III

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

Richard V. Lee, Esq. SunTrust Center, 1001 Third Avenue West, Suite 350 Bradenton, Florida 34205

Having been named registered agent and to accept service of process for the above stated Professional Association at the place designated in the certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of

all statues 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 608, F.S.

Richard V. Lee, Registered Agent

ARTICLE IV

The Professional Association is to be managed by one or more managers and is, therefore, a manager – managed company.

ARTICLE V

This Corporation is organized for the following purposes:

- a. To engage in the practice of chiropractic as a professional corporation and to own and operate a chiropractic clinic for the purposes of providing chiropractic care and treatment.
- b. To promote chiropractic and scientific research and knowledge; to furnish related laboratory and clinical services; and to own real and personal property, enter into contracts, and engage in any lawful business necessary for the rendering of the professional chiropractic services.
- c. To do everything necessary, proper, or convenient to accomplish any of the purposes set forth in these articles, and to do every other act incidental to the corporate purposes which is not forbidden by Florida laws or by the provisions of these articles of incorporation.

The professional services of this corporation shall be carried out only through officers, employees, and agents, each of whom is licensed or otherwise legally qualified to render professional chiropractic services in the State of Florida.

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization the 2^{RD} day of October, 2002.

Signed, sealed and delivered in the presence of:

Witness

Witness

Authorized Representative

STATE OF FLORIDA

COUNTY OF MANATEE

BEFORE ME, the undersigned authority, personally appeared EDWARD R. DIETZ, JR who is personally known to me, and who upon first being duly sworn, deposed and said that he has read the foregoing Articles of Organization and that he has executed the same freely and voluntarily.

WITNESS my hand and official seal on the $\frac{\partial^{10}\theta}{\partial x^{10}}$ day of October, 2002

Notary Public

My Commission CC956811

My Commission Expires:

STATE OF FLORIDA

COUNTY OF MANATEE

BEFORE ME, the undersigned authority, personally appeared RICHARD V. LEE, who is personally known to me, and who upon first being duly sworn, deposed and said that he consents to serve as registered agent of DIETZ CHIROPRATIC, PA at the following address: SunTrust Center, 1001 Third Avenue West, Suite 350, Bradenton, Florida 34205.

WITNESS my hand and official seal on the 4day of October, 2002

> KIMBERLY L. MCCULLEN MY COMMISSION # CC 893576 EXPIRES: March 20, 2004 Honded Thru Notary Public Underwriters

My Commission Expires:

Notary Public