RI SOS Filing Number: 201072526210 Date: 11/30/2010 9:39 AM

Filing Fee: $150.00 **ID Number:** _____

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION
(To Be Filed In Duplicate)

Pursuant to the provisions of Chapter 7-16 of the General Laws, 1956, as amended, the following Articles of Organization are adopted for the limited liability company to be organized hereby:

1. The name of the limited liability company is:

   LEPRE WELLNESS CENTER, LLC

2. The address of the limited liability company's resident agent in Rhode Island is:

   24 SALT POND ROAD, C-3 **WAKEFIELD**, RI **02879**
   (Street Address, **not** P.O. Box) (City/Town) (Zip Code)

   and the name of the resident agent at such address is **JAMES A. DONNELLY, ESQUIRE**
   (Name of Agent)

3. Under the terms of these Articles of Organization and any written operating agreement made or intended to be made, the limited liability company is intended to be treated for purposes of federal income taxation as:

   (Check one box only)

   ☐ a partnership *or* ☑ a corporation *or* ☐ disregarded as an entity separate from its member

4. The address of the principal office of the limited liability company if it is determined at the time of organization:

   1525 SMITH STREET, SUITE 7, NORTH PROVIDENCE, RHODE ISLAND 02911

   (If not determined, so state)

5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-16, unless a more limited purpose or duration is set forth in paragraph 6 of these Articles of Organization.

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Form No. 400
Revised: 10/15/02

6. Additional provisions, if any, not inconsistent with law, which the members elect to have set forth in these Articles of Organization, including, but not limited to, any limitation of the purposes or duration for which the limited liability company is formed, and any other provision which may be included in an operating agreement:

NONE.

7. The limited liability company is to be managed by:

(Check one box only)

☐ its members *or* ☑ by one (1) or more managers

8. If the limited liability company has managers at the time of filing these Articles of Organization, state the name and address of each manager:

Manager	Address
Stephen P. Lepre	**67 Wright Lane, Jamestown, Rhode Island 02835**
Joshua Perry	**25 MacArthur Drive, Smithfield, Rhode Island 02917**

9. The date these Articles of Organization are to become effective, if later than the date of filing, is:

Upon filing

(not prior to, nor more than 30 days after, the filing of these Articles of Organization)

Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: **November 29, 2010**

Signature of Authorized Person

Stephen P. Lepre

67 Wright Lane
Jamestown, Rhode Island 02835
(401) 423-3792 Home
(401) 862-7075 Mobile
Email: *stevem@leprept.com*

November 29, 2010

Office of the Secretary of State
Corporations Division
148 West River Street
Providence, Rhode Island 02904

Re: Permission to use the name – LEPRE WELLNESS CENTER, LLC

Dear Sir or Madam:

I write to give permission to use the name, "LEPRE WELLNESS CENTER, LLC" for a new limited liability company being established by another person and me.

I am the principal in the following corporations and/or limited liability companies:

Stephen P. Lepre Associates Physical Therapy Services, Inc.
Lepre Physical Therapy of East Greenwich, LLC
Lepre Physical Therapy of North Providence, LLC
Lepre Physical Therapy of Narragansett, LLC
Lepre Physical Therapy of Cumberland, LLC
Lepre Physical Therapy of Barrington, LLC
Lepre Physical Therapy Contract Services, LLC

This new venture is an extension of services that we have provided to patients in Rhode Island for many years.

Thank you for your kind attention to this matter.
Very truly yours,

Stephen P. Lepre

State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

November 30, 2010 9:39 AM

A. RALPH MOLLIS

Secretary of State

55776-1-564496