

ARTICLES OF ORGANIZATION

OF

Cornerstone Chiropractic Center, LLC

The undersigned, serving as organizer, hereby forms a Kentucky limited liability company (the "Company") pursuant to the Kentucky Limited Liability Company Act (the "Act"), KRS Chapter 275, as follows:

1. **Name**: The name of the Company is Cornerstone Chiropractic Center, LLC.
2. **Initial Registered Office and Agent**: The street address of the Company's initial registered office is 1703 Highway 121 North Bypass, Murray, KY 42071. The name of its initial registered agent at that office is Adam Heskett.
3. **Initial Principal Office**: The mailing address of the initial principal office of the Company is 1703 Highway 121 North Bypass, Murray, KY 42071.
4. **Statement of Management**: The Company is to be managed by one or more managers, to be exercised in accordance with the Company's operating agreement.
5. **Effective Date**: The effective date of the Company shall be January 1, 2019.
6. **Dissolution**: The Company does not have a specific date of dissolution. The Company shall dissolve as provided in the Act and the Company's operating agreement.
7. **Statement of Limited Liability**: Except as otherwise provided by Kentucky law, no member, manager, agent or employee of the limited liability company shall be personally liable for the debts, obligations, or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, agent or employee of the Company.

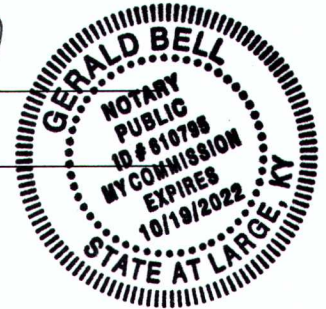
IN WITNESS WHEREOF, the undersigned has duly executed these Articles of Organization this 10 day of December, 2018.


Adam Heskett, Organizer

STATE OF KENTUCKY
COUNTY OF CALLOWAY

The foregoing Articles of Organization of Cornerstone Chiropractic Center, LLC were acknowledged, subscribed and sworn to before me this 10th day of December, 2018, by Adam Heskett (personally known to me or proved to me on the basis of satisfactory evidence), Organizer on behalf of the company.

Gerald Bell
NOTARY PUBLIC
My Commission Expires: _____



S E A L

THIS INSTRUMENT PREPARED BY:
HAVERSTOCK, BELL & PITMAN
213 South 12th Street
P. O. Box 1075
Murray, KY 42071
(270) 753-1694

Gerald Bell
GERALD BELL

CONSENT OF REGISTERED AGENT

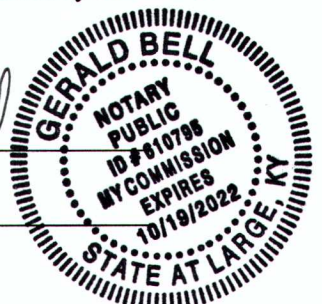
Pursuant to KRS Chapter 275, the undersigned, as the initial registered agent identified in paragraph 2 of the Articles of Organization of Cornerstone Chiropractic Center, LLC (the "Company"), hereby consents to serve the Company in that capacity until such time as such appointment is terminated or until the undersigned resigns in accordance with the Kentucky Limited Liability Company Act.

Adam Heskett D.C.
Adam Heskett

STATE OF KENTUCKY
COUNTY OF CALLOWAY

The foregoing Consent of Registered Agent was acknowledged, subscribed and sworn to before me this 10th day of December, 2018 by Adam Heskett (personally known to me or proved to me on the basis of satisfactory evidence).

Gerald Bell
NOTARY PUBLIC
My Commission Expires: _____



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