

L05000015494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

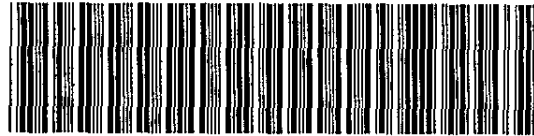
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/11/05--01043--016 **250.00

2005 FEB 11 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2/15/05
JH

**WELLNESS CONNEXION, INC.
4809 SW 91 Terrace
Gainesville, FL 32608
352.376.8600**

February 9, 2005

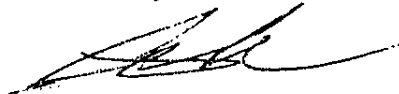
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Wellness Connexion, LLC
Wellness Connexion Gainesville, LLC

Enclosed are the Articles of Organization for Wellness Connexion, LLC
and Wellness Connexion Gainesville, LLC, along with a \$250 check for the filing fees.

Please process the Articles in the usual manner. Please contact me with any
questions.

Sincerely,



Steven Kalishman

SJK/st

Enclosures: Articles of Incorporation
Check

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

Wellness Connexion Gainesville, LLC

A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Statutes)

1. **Name.** The name of the limited liability company is Wellness Connexion Gainesville, LLC.
2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:

4809 SW 91 Terrace, Gainesville, FL 32608
4. **Mailing Address.** The mailing address of the limited liability company is:

4809 SW 91 Terrace, Gainesville, FL 32608
5. **Management.** The limited liability company is to be managed by one or more members and is, therefore, a member-managed company.

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2015 FEB 11 AM 10:28
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF FLORIDA

6. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida street address of the registered agent is:

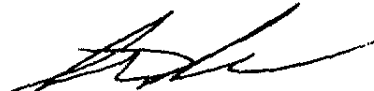
Steven Kalishman
4809 SW 91 Terrace
Gainesville, FL 32608

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 as provided for in Chapter 608, F.S.



Steven Kalishman

7. **Effective Date.** The effective date of the limited liability company shall be the date of filing unless otherwise stated below:



Steven Kalishman
Managing Member
Wellness Connexion Gainesville, LLC

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