# Electronic Articles of Organization For Florida Limited Liability Company

L06000020698 FILED 8:00 AM February 24, 2006 Sec. Of State dbruce

### **Article I**

The name of the Limited Liability Company is: THREAD THERAPY LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:

PO BOX 3583531 GAINESVILLE, FL. 32635

The mailing address of the Limited Liability Company is:

PO BOX 358531 GAINESVILLE, FL. 32635

### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### **Article IV**

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

JOHN LUCKEY 4045 NW 43RD ST, STE A GAINESVILLE, FL. 32606

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.

Registered Agent Signature: JOHN LUCKEY

## Article V

The name and address of managing members/managers are:

Title: MGR NICOLE M CARUSONE 4909 NW 36 DR GAINESVILLE, FL. 32605

Title: MGR STEPHANIE K FINNEY 9235 NW 26 AVE GAINESVILLE, FL. 32606

Title: MGR AUBRI A WALKER 10107 SW 13 PL GAINESVILLE, FL. 32607

Title: MGR AMBER L TREAT 2809 NW 48 AVE GAINESVILLE, FL. 32605

Signature of member or an authorized representative of a member Signature: NICOLE CARUSONE

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