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Division of Corporations

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Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 : (800)494-3124 Phone

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FLORIDA/FOREIGN LIMITED LIABILITY CO

## THE WELLNESS MENTORS LLC

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

#### ARTICLE I NAME

The name of the Limited Liability Company is: THE WELLNESS MENTORS LLC

### ARTICLE II ADDRESS

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

201 N. UNIVERSITY DR SUITE 116

PLANTATION FL 33324

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & STATE STAT

The name and the Florida street address of the registered agent agent LINDA GETTINGER - DINNER

201 N. UNIVERSITY DR SUITE 116

PLANTATION FL 33324

Having been named as registered agent 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..

LINDA GETTINGÉR - DINNER Registered Agent's Signature

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### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one members and is, therefore, a Member-Managed Company.

### ARTICLE V MEMBERS (optional)

MANAGING MEMBER
LINDA GETTINGER - DINNER
201 N. UNIVERSITY DR SUITE 116
PLANTATION FL 33324

O6 NOV 29 AM 9: 1 SECRETARY OF STATE TALLAHASSEE, FLORING

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

NAME OF SIGNER LINDA GETTINGER - DINNER Typed or printed name of signee

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