

W0800002758

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000056382 3)))



H080000563823ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 MAR -4 AM 8:53

FILED

RECEIVED

08 MAR -4 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

WHOLE BODY HEALING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

T. CLINE

Electronic Filing Menu

Corporate Filing Menu

Help

MAR - 5 2008

EXAMINER

H. 08000056382.3

**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:

Whole Body Healing, LLC

ARTICLE II ADDRESS

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

613 Gazetta Way

West Palm Beach, Florida 33413

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

David Lopez

613 Gazetta Way

West Palm Beach, Florida 33413

2008 MAR -4 AM 8:53
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

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..

x David P Lopez

David Lopez / Registered Agent's signature

08000056382.3

PAGE 2

Whole Body Healing, LLC

ARTICLE IV MANAGEMENT

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

ARTICLE V MEMBERS (optional)

Managing Member

Abby G. Lopez

613 Gazetta Way

West Palm Beach, Florida 33413

2008 MAR -4 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

x Abby G. Lopez

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.

Abby G. Lopez