Electronic Articles of Organization
For
Florida Limited Liability Company

L08000061247
FILED 8:00 AM
June 23, 2008
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

FLORIDA WELLNESS ALLIANCE, LLC

Article II

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

4309 EVANS AVE
403
FT MYERS, FL. 33901

The mailing address of the Limited Liability Company is:

PO BOX 07069
FT MYERS, FL. 33919

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:

TAMMY PROVENCE
4309 EVANS AVE
403
FT MYERS, FL. 33901

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: TAMMY PROVENCE

Article V

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The name and address of managing members/managers are:

Title: MGR
TAMMY PROVENCE
PO BOX 07069
FT MYERS, FL. 33919

Signature of member or an authorized representative of a member

Signature: TAMMY PROVENCE