

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L10000022906  
FILED 8:00 AM  
March 01, 2010  
Sec. Of State  
shawkes

**Article I**

The name of the Limited Liability Company is:  
METAMORPHOSIS WELLNESS AND HEALING, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
845 SR 21 NORTH  
MELROSE, FL. 32666

The mailing address of the Limited Liability Company is:  
845 SR 21 NORTH  
MELROSE, FL. 32666

**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:  
JULIANNA WILKINSON  
845 SR 21 NORTH  
MELROSE, FL. 32666

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: JULIANNA WILKINSON

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
JULIANNA WILKINSON  
845 SR 21 NORTH  
MELROSE, FL. 32666

Title: MGRM  
ELIZABETH BROWN  
845 SR 21 NORTH  
MELROSE, FL. 32666

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### **Article VI**

The effective date for this Limited Liability Company shall be:

03/01/2010

Signature of member or an authorized representative of a member

Signature: ELIZABETH BROWN