

#L 10000130342

Division of Corporations

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Florida Department of State
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FLORIDA LIMITED LIABILITY CO.
wellness and rehab specialists llc

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY OF
WELLNESS AND REHAB SPECIALISTS LLC**

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ARTICLE I

**The name of the Limited Liability Company shall be: WELLNESS
AND REHAB SPECIALISTS LLC**

ARTICLE II

**The Company is organized for any legal and lawful purpose for
which a limited liability company may be organized pursuant to the Act.**

ARTICLE III

**The mailing address and street address of the principal office of the
Limited Liability Company: 2531 SW FONDURA ROAD, PORT ST. LUCIE,
FL 34953**

ARTICLE IV

**The name and the Florida street address of the registered agent:
KAHARI T. WOOD
2531 SW FONDURA ROAD
PORT ST. LUCIE, FL 34993**

ARTICLE V

The name of the Managing Member(s) and Member(s) are:

**MANAGING MEMBER/MEMBER
KAHARI T. WOOD**


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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE

WELLNESS AND REHAB SPECIALISTS LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.


Signature of Registered Agent


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.)

KAHARI T. WOOD
Typed or printed name of signee

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