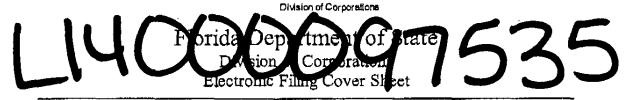
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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : BAND GATES, F.L.

Account Number : 120130000059

Phone

: (941)366-8010

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EMBIL Address: in fo@bruceday, com

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#### FLORIDA LIMITED LIABILITY CO. PAIN FREE SIESTA KEY, LLC

Certificate of Status	0
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<sup>JUN 18 201</sup> J. HARRIS (((H14000143384 3)))

# ARTICLES OF ORGANIZATION OF PAIN FREE SIESTA KEY, LLC

a Florida Limited Liability Company Under Chapter 605, Florida Statutes

# ARTICLE I

The business and affairs of the Limited Liability Company shall be conducted under the name of:

#### PAIN FREE SIESTA KEY, LLC

### ARTICLE II PRINCIPAL OFFICE

The street address and the malling address of the principal place of business of the Limited Liability Company shall be:

1200 S. View Drive Sarasota, Florida 34242

### ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Band Gates, P.L. One South School Avenue, Suite 501 Sarasota, Florida 34237 SHORT TARY OF STATE AS DIVISION OF SURPORATIONS

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### ARTICLE IV MANAGEMENT POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations or Operating Agreement of the Limited Liability Company. The names and addresses of the initial managers of the Company are:

Bruce Day 1200 S. View Drive Sarasota, Florida 34242

Dolores Day 1200 S. View Drive Sarasota, Florida 34242

#### ARTICLE V EFFECTIVE DATE

The effective date of the filing of these Articles of Organization shall be upon the filing of these Articles of Organization.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the 16th day of June 2014.

CHAD L. GATES

"Authorized Representative"

SWANTARY OF SOLIDAY DIVISION OF CORPORATIONS

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Chapter 605 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

The name of the Limited Liability Company is:

#### PAIN FREE SIESTA KEY, LLC

II. The name and the Florida street address of the registered agent is:

Band Gates, P.L. One South School Avenue Suite 501 Sarasota, Florida 34237

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

BAND GATES P.L., Registered Agent

Chad L. Gates Its Manager

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