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From: Harper Kynes

727 797 8206

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Florida Department of State  
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Email Address: Michael.sovie@hotmail.com

FLORIDA LIMITED LIABILITY CO.  
Blue Water RX, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION  
OF  
BLUE WATER RX, LLC

The undersigned authorized representative does hereby subscribe to, acknowledge, and file the following Articles of Organization for the purpose of creating a limited liability company (the "Limited Liability Company") under the laws of the State of Florida.

ARTICLE I  
Name

The name of the Limited Liability Company shall be BLUE WATER RX, LLC.

ARTICLE II  
Term of Existence

The Limited Liability Company shall begin existence on the date of filing of these Articles of Organization with the Florida Secretary of State, and shall have perpetual existence thereafter.

ARTICLE III  
Principal Office and Mailing Address  
of the Limited Liability Company

The mailing address and street address of the principal office of the Limited Liability Company shall be 819 Harbor Island, Clearwater, Florida 33767, with the privilege of having its offices (and branch offices) at other places within or without the State of Florida.

ARTICLE IV  
Initial Registered Agent and Office

The initial registered office of the Limited Liability Company is 819 Harbor Island, Clearwater, Florida 33767. The initial registered agent at that address is MICHAEL J. SOVIE.

ARTICLE V  
Management

The Limited Liability Company shall be managed by one (1) or more managers and is, therefore, a manager-managed company.

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**ARTICLE VI**  
**Managers**

The name and address of each Manager of the Limited Liability Company are:

Michael J. Sovie  
819 Harbor Island  
Clearwater, Florida 33767

Leah Sovie  
819 Harbor Island  
Clearwater, Florida 33767

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization on the 23<sup>rd</sup> day of June, 2015, and in accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155 of the Florida Statutes.


  
\_\_\_\_\_  
Michael J. Sovie,  
Authorized Representative

**CERTIFICATE OF DESIGNATION  
OF REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of Section 605.0113 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered agent and registered office in the State of Florida.

1. The name of the Limited Liability Company is: BLUE WATER RX, LLC.
2. The name and street address of the registered agent and office is MICHAEL J. SOVIE, 819 Harbor Island, Clearwater, Florida 33767.

BLUE WATER RX, LLC.

  
\_\_\_\_\_  
By: Michael J. Sovie,  
Authorized Representative

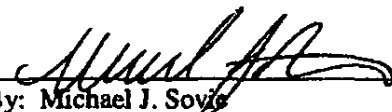
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The undersigned, having been named as registered agent for the above-named Limited Liability Company to accept service of process for the above-stated Limited Liability Company at the place designated in this certificate, hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with, and accepts the obligations of its position as registered agent for BLUE WATER RX, LLC as provided for in Chapter 605 of the Florida Statutes.

Dated this 23<sup>rd</sup> day of June, 2015.

  
By: Michael J. Sovie

"Registered Agent"

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