

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

L16000149536  
FILED 8:00 AM  
August 10, 2016  
Sec. Of State  
vherring

**Article I**

The name of the Limited Liability Company is:  
LEGACY HEALING CENTER MARGATE LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
2960 N STATE RD.  
102  
MARGATE, FL. 33063

The mailing address of the Limited Liability Company is:  
2960 N STATE RD.  
102  
MARGATE, FL. 33063

**Article III**

The name and Florida street address of the registered agent is:  
PETER A ROSE  
2201 NW CORPORATE BLVD  
205  
BOCA RATON, FL. 33431

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: PETER A ROSE

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR  
KAROLYN FOX  
8550 LEWIS RIVE RD  
DELRAY BEACH, FL. 33446

Title: MGR  
MASSIEL EFFRON  
10261 LAKE VISTA COURT  
PARKLAND, FL. 33076

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### **Article V**

The effective date for this Limited Liability Company shall be:

08/10/2016

Signature of member or an authorized representative

Electronic Signature: PETER ROSE

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.