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FLORIDA LIMITED LIABILITY CO.  
JOIE DE VIVRE HEALTH AND CHIROPRACTIC, LLC

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DIVISION OF CORPORATIONS

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**ARTICLES OF ORGANIZATION**  
**OF**  
**JOIE DE VIVRE HEALTH AND CHIROPRACTIC, LLC**  
**(A Florida Limited Liability Company)**

Pursuant to the provisions of Florida Statutes and the consent of all of the members, this Florida professional limited liability company adopts the following Articles of Organization:

**ARTICLE I**  
**Name and Duration**

The name of this Limited Liability Company is JOIE DE VIVRE HEALTH AND CHIROPRACTIC, LLC (hereinafter referred to as the "Company"). The duration of the Company shall be perpetual.

**ARTICLE II**  
**Principle Office**

The street address of the principal office of the Company is:

11240 Fountain Lake Boulevard  
Leesburg, Florida 34788

or such other place as the members may determine from time to time.

**ARTICLE III**  
**Registered Office and Agent**

The name and Florida street address of the Company's registered agent are:

The Health Law Firm, P.A.  
1101 Douglas Avenue  
Altamonte Springs, Florida 32714

**ARTICLE IV**  
**Company Purposes, Powers, and Rights**

1. The nature of the business to be conducted or promoted and the purposes of the Company are to practice chiropractic and deliver health care services and any and all other purposes permitted by law.

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2. The Company shall have all of the powers granted to a limited liability company under the laws of the State of Florida, including, without limitation, the powers specifically enumerated in Chapter 605, Florida Statutes.

**ARTICLE V**  
**Members**

1. The Members of the Company are set forth in the Company's records dated as of the date hereof.

2. Additional Members may be admitted from time to time only upon the written consent of the Members as provided in the Company's Operating Agreement (Regulations), and under the terms and conditions upon which such consent may be conditioned.

**ARTICLE VI**  
**Amendment**

The Members shall have the right to amend, alter, change, or repeal any provision contained in these Articles of Organization in the manner now or hereafter prescribed by a written agreement among the Members.

**ARTICLE VII**  
**Regulations**

The power to adopt, alter, amend, or repeal an Operating Agreement (Regulations) for the management of this Company shall be vested in the Members.

**ARTICLE VIII**  
**Member-Managers**

The names and addresses of the Members authorized to manage the Limited Liability Company are:

Member-Managers: James Llewellyn  
11240 Fountain Lake Boulevard  
Leesburg, Florida 34788

Will Llewellyn  
11240 Fountain Lake Boulevard  
Leesburg, Florida 34788

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**ARTICLE IX**  
**Transferability of a Member's Interest**

A Member's interest in the Company may be transferred only with the unanimous written consent of all the remaining Members if the transferee intends to become a Member. Subject to the terms of a written agreement among the Members, without such consent, the transferee shall not be entitled to become a Member of the Company, but shall be entitled only to the share of profits, other compensation, or return of contributions to which the transferrer otherwise would be entitled.

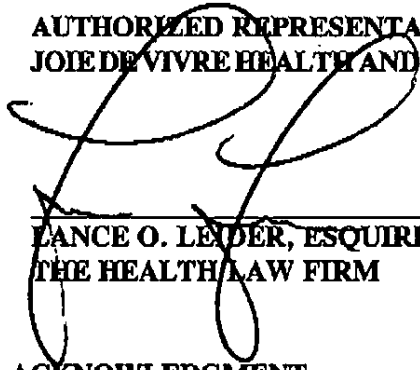
**The Date of Adoption of these Articles of Organization is: October 27, 2016.**

**The Effective Date of these Articles of Organization is: October 27, 2016, or when filed with the Secretary of State.**

**These Articles of Organization were approved by all of the members and all of the managers. The number of votes cast for the amendments by the members and by the managers was sufficient for approval.**

**SIGNED** this 27th day of October 2016.

**AUTHORIZED REPRESENTATIVE OF:  
JOIE DE VIVRE HEALTH AND CHIROPRACTIC, LLC**



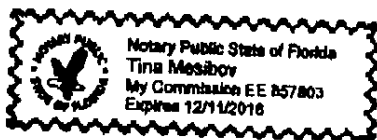
**LANCE O. LEIDER, ESQUIRE  
THE HEALTH/LAW FIRM**

**ACKNOWLEDGMENT**

STATE OF FLORIDA     )  
COUNTY OF SEMINOLE )

The foregoing instrument was acknowledged before me on this 27th day of October, 2016, by Lance O. Leider, who is personally known to me, acting as the Authorized Representative of this Company.

*Tina Masibov*  
\_\_\_\_\_  
NOTARY PUBLIC-STATE OF FLORIDA



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**CERTIFICATE OF DESIGNATION**  
**OF**  
**NEW REGISTERED AGENT/REGISTERED OFFICE**  
**OF**  
**JOIE DE VIVRE HEALTH AND CHIROPRACTIC, LLC**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113(2), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the limited liability company is:

**Jole de Vivre Health and Chiropractic, LLC**

2. The name and the Florida street address of the current registered agent are:

The Health Law Firm, P.A.  
1101 Douglas Avenue  
Altamonte Springs Florida 32714

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.

By: George F. Indest III / Date 10/27/2016  
George F. Indest III,  
President and Managing Partner

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