

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

L17000089891
FILED 8:00 AM
April 24, 2017
Sec. Of State
cmwood

Article I

The name of the Limited Liability Company is:

EAT SLEEP RECOVER LLC

Article II

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

8113 TUMBLESTONE CT, SUITE 826
DELRAY BEACH, FL. 33446

The mailing address of the Limited Liability Company is:

8113 TUMBLESTONE CT, SUITE 826
DELRAY BEACH, FL. 33446

Article III

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

PATRICK LINDEN
8113 TUMBLESTONE CT, SUITE 826
DELRAY BEACH, FL. 33446

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: PATRICK LINDEN

Article IV

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

Title: AMBR
PATRICK LINDEN
963 OYSTER BAY ROAD
EAST NORWICH, NY. 11732

Title: AMBR
BRADLEY DAVIDSON
2563 COLUMBIA DRIVE
COSTA MESA, CA. 92626

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Signature of member or an authorized representative

Electronic Signature: PATRICK LINDEN

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.