

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

**L17000254492
FILED 8:00 AM
December 13, 2017
Sec. Of State
jareyes**

Article I

The name of the Limited Liability Company is:

NICKERSON INSTITUTE OF INTEGRATIVE HEALTH TRAINING,
LLC

Article II

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

4557 PASADENA CT.
NAPLES, FL. 34109

The mailing address of the Limited Liability Company is:

4557 PASADENA CT.
NAPLES, FL. 34109

Article III

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

WENDY NICKERSON
3300 BONITA SPRINGS BEACH ROAD SW SUITE 13
6TH FLOOR
BONITA SPRINGS, FL. 34134

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: WENDY NICKERSON

Article IV

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

Title: MGR
WENDY NICKERSON
4557 PASADENA CT.
NAPLES, FL. 34109

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Article V

The effective date for this Limited Liability Company shall be:

12/12/2017

Signature of member or an authorized representative

Electronic Signature: BONIE MONTALVO

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.