Electronic Articles of Organization For Florida Limited Liability Company

L18000057595 FILED 8:00 AM March 05, 2018 Sec. Of State

Article I

The name of the Limited Liability Company is: MULTI-CARE MEDICAL OF SW FLORIDA, PLLC

Article II

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

13701 CYPRESS TERRACE CIRCLE FT MYERS, FL. 33907

The mailing address of the Limited Liability Company is:

13701 CYPRESS TERRACE CIRCLE FT MYERS, FL. 33907

Article III

Other provisions, if any:

CHIROPRACTIC & REHAB SERVICES

Article IV

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

JACQUELINE PALERMO 2525 EMBASSY DRIVE SUITE 14 COOPER CITY, FL. FL

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: JACQUELINE PALERMO

Article V

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

Title: MGR BRUCE GELCH 11270 PINE BLVD

PEMBROKE PINES, FL. 33026

Signature of member or an authorized representative

Electronic Signature: BRUCE GELCH

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.

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