

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

**L18000160564
FILED 8:00 AM
July 02, 2018
Sec. Of State
bnmalchow**

Article I

The name of the Limited Liability Company is:

MEDICAL MARIJUANA AND PAIN MANAGEMENT ASSOCIATES LLC

Article II

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

7575 KINGSPONTE PARKWAY
SUITE 23
ORLANDO, FL. 32819

The mailing address of the Limited Liability Company is:

7575 KINGSPONTE PARKWAY
SUITE 23
ORLANDO, FL. 32819

Article III

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

DANIEL LOREN
7575 KINGSPONTE PARKWAY
SUITE 23
ORLANDO, FL. 32819

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: DANIEL LOREN

Article IV

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

Title: AMBR
DANIEL LOREN
8026 RURAL RETREAT CT
ORLANDO, FL. 32819

Title: AMBR
YAEL MALKALOREN
8026 RURAL RETREAT CT
ORLANDO, FL. 32819

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Signature of member or an authorized representative

Electronic Signature: DANIEL LOREN

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.