

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

L18000196579  
FILED 8:00 AM  
August 16, 2018  
Sec. Of State  
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**Article I**

The name of the Limited Liability Company is:

BAY AREA HEALTH, LLC.

**Article II**

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

6213 STATE ROAD 54  
NEW PORT RICHEY, FL. US 34653

The mailing address of the Limited Liability Company is:

6213 STATE ROAD 54  
NEW PORT RICHEY, FL. US 34653

**Article III**

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

CHRISTOPHER PAINE  
6213 STATE ROAD 54  
NEW PORT RICHEY, FL. 34653

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: CHRISTOPHER PAINE

## **Article IV**

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

Title: MGR  
CHRISTOPHER PAINE  
1725 NODDING THISTLE DR.  
NEW PORT RICHEY, FL. 34655 US

Title: MGR  
ANDREW TSIUKLAS  
2232 TONIWOOD LN.  
PALM HARBOR, FL. 34685 US

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Signature of member or an authorized representative

Electronic Signature: CHRISTOPHER PAINE

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.