Electronic Articles of Organization For Florida Limited Liability Company

L18000197554 FILED 8:00 AM August 17, 2018 Sec. Of State

Article I

The name of the Limited Liability Company is: 359 HEALTH LLC

Article II

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

15602 FARMSWORTH LN TAMPA, . 33624

The mailing address of the Limited Liability Company is:

15602 FARMSWORTH LN TAMPA, FL. 33624

Article III

Other provisions, if any:

INTEGRATIVE MEDICINE

Article IV

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

MAYRE URDANETA 15602 FARMSWORTH LN MIAMI. FL. 33624

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: MAYRE URDANETA MD

Article V

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

Title: MGR MAYRE URDANETA 15602 FARMSWORTH LN TAMPA, FL. 33624

Title: AMBR DIANE D COSME 4036 ANGEL OAK CT APT 104 TAMPA, FL. 33613

Title: AP NICOLE PESCE 15602 FARMSWORTH LN TAMPA, FL. 33624

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Article VI

The effective date for this Limited Liability Company shall be:

08/14/2018

Signature of member or an authorized representative

Electronic Signature: MAYRE URDANETA

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.