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FLORIDA LIMITED LIABILITY CO.
Family Wellness and Aesthetic Center LLC

Certificate of Status	0
Certified Copy	0
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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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SERVICES

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**ARTICLES OF ORGANIZATION OF
FAMILY WELLNESS AND AESTHETIC CENTER LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Florida Statutes Chapter 605, as amended, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I — NAME

The name of the limited liability company is Family Wellness and Aesthetic Center LLC (the "Company").

ARTICLE II — ADDRESS

The mailing address and street address of the principal office of the Company is 2501 E. Commercial Blvd., Suite 211, Fort Lauderdale, Florida 33308.

ARTICLE III — DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV — REGISTERED AGENT AND ADDRESS

The name and street address of the initial registered agent of the Company in the State of Florida is Alan B. Cohn, 200 E. Broward Blvd., Suite 1800, Fort Lauderdale, Florida 33301.

ARTICLE V — MANAGEMENT

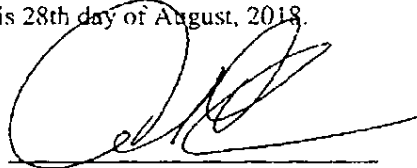
The Company will be manager-managed. The names and addresses of the initial member of the Board of Managers of the Company is Fanuel Dorilas, 2501 E. Commercial Blvd., Suite 211, Fort Lauderdale, Florida 33308.

ARTICLE VI — AUTHORIZED REPRESENTATIVE

The name and address of the Authorized Representative signing these Articles is Alan B. Cohn, 200 E. Broward Blvd., Suite 1800, Fort Lauderdale, Florida 33301.

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FAMILY WELLNESS AND AESTHETIC CENTER LLC
DIVISION OF CORPORATE SERVICES

IN WITNESS WHEREOF, the undersigned as Authorized Representative has made and subscribed these Articles of Organization this 28th day of August, 2018.

A handwritten signature in black ink, appearing to be 'Alan B. Cohn', written over a horizontal line.

Alan B. Cohn
Authorized Representative

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

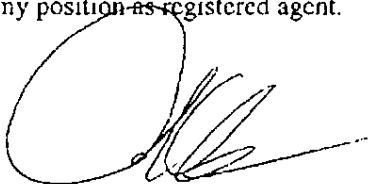
Family Wellness and Aesthetic Center LLC

2. The name and address of the registered agent and office is:

Alan B. Cohn
200 E. Broward Blvd., Suite 1800
Fort Lauderdale, FL 33301

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.

Dated: August 28, 2018



Alan B. Cohn