

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

**L18000218010  
FILED 8:00 AM  
September 13, 2018  
Sec. Of State  
cmwood**

**Article I**

The name of the Limited Liability Company is:

UCENTRIC LLC

**Article II**

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

2276 NORTH US HIGHWAY 1  
FORT PIERCE, FL. 34946

The mailing address of the Limited Liability Company is:

2276 NORTH US HIGHWAY 1  
FORT PIERCE, FL. 34946

**Article III**

Other provisions, if any:

HEALTH AND WELLNESS INDUSTRY.

**Article IV**

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

ROBERT W MCNEILLEY II  
1430 SHERIDAN ST  
APT G22  
HOLLYWOOD, FL. 33020

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: ROBERT W. MCNEILLEY II

## **Article V**

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

Title: AMBR  
MICHAEL J CARNEVALE  
2401 ATLANTIC BEACH BLVD  
FORT PIERCE, FL. 34949

Title: AMBR  
MARK MYERS  
533 ROBBINS PLACE  
BREA, CA. 92823

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Signature of member or an authorized representative

Electronic Signature: ROBERT W. MCNEILLEY II

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.