

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

L19000097277
FILED 8:00 AM
April 08, 2019
Sec. Of State
bnmalchow

Article I

The name of the Limited Liability Company is:

COMPREHENSIVE CARE PARTNERS, LLC

Article II

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

14908 GARTH POND CIRCLE
JACKSONVILLE, FL. US 32258

The mailing address of the Limited Liability Company is:

P.O. BOX 311
JACKSONVILLE, FL. US 32258

Article III

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

MELISSA M O'QUIN
14908 GARTH POND CIRCLE
JACKSONVILLE, FL. 32258

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: MELISSA MICHELLE O'QUIN

Article IV

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

Title: MGR
MELISSA M O'QUIN
14908 GARTH POND CIRCLE
JACKSONVILLE, FL. 32258 US

Title: MGR
DONALD S COVINGTON
2100 OAK HAMMOCK DR
PONTE VEDRA BEACH, FL. 32082 US

Signature of member or an authorized representative

Electronic Signature: MELISSA MICHELLE O'QUIN

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.

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