

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

**L19000134658
FILED 8:00 AM
May 20, 2019
Sec. Of State
msimmons**

Article I

The name of the Limited Liability Company is:
CENTRICITY MOBILE HEALTH CENTER, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
3175 S CONGRESS AVE
STE 208
LAKE WORTH, FL. UN 33461

The mailing address of the Limited Liability Company is:
PO BOX 880603
PORT SAINT LUCIE, FL. UN 34988

Article III

The name and Florida street address of the registered agent is:
BINETTE APSALON DORMINIER
3175 S CONGRESS AVE
STE 208
LAKE WORTH, FL. 33461

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: BINETTE APSALON DORMINIER

Article IV

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

Title: CEO
BINETTE APSALON DORMINIER
3175 S CONGRESS AVE STE 208
LAKE WORTH, FL. 33461 UN

L19000134658
FILED 8:00 AM
May 20, 2019
Sec. Of State
msimmons

Signature of member or an authorized representative

Electronic Signature: BINETTE APSALON DORMINIER

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.