Electronic Articles of Organization For Florida Limited Liability Company

L19000272464 FILED 8:00 AM October 31, 2019 Sec. Of State jsdennis

Article I

The name of the Limited Liability Company is: MNICA EASE NECK PAIN LLC

Article II

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

13439 NW 19TH LANE AMB # 4466 MIAMI, FL. 33182

The mailing address of the Limited Liability Company is:

13439 NW 19TH LANE AMB # 4466 MIAMI, FL. US 33182

Article III

Other provisions, if any:

ANY LEGAL PURPOSE

Article IV

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

MONICA E ODUBER 13439 NW 19TH LANE AMB # 4466 MIAMI. FL. 33182

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: MONICA E ODUBER

Article V

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

Title: AMBR MONICA E ODUBER 13439 NW 19TH LANE, AMB # 4466 MIAMI, FL. 33182 US L19000272464 FILED 8:00 AM October 31, 2019 Sec. Of State jsdennis

Signature of member or an authorized representative

Electronic Signature: MONICA E ODUBER

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.