

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

L19000273001  
FILED 8:00 AM  
October 31, 2019  
Sec. Of State  
jafason

**Article I**

The name of the Limited Liability Company is:

FAMILY WELLNESS AND HEALTH, LLC

**Article II**

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

9139 WOODHURST DRIVE  
NAPLES, FL. US 34120

The mailing address of the Limited Liability Company is:

9139 WOODHURST DRIVE  
NAPLES, FL. US 34120

**Article III**

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

MIKE DAL LAGO, P.A.  
999 VANDERBILT BEACH ROAD  
SUITE 200  
NAPLES, FL. 34108

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: MICHAEL R. DAL LAGO

## **Article IV**

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

Title: P  
DUANE OLSON  
9139 WOODHURST DRIVE  
NAPLES, FL. 34120 US

Title: VP  
STEPHANIE OLSON  
9139 WOODHURST DRIVE  
NAPLES, FL. 34120 US

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Signature of member or an authorized representative

Electronic Signature: MICHAEL R. DAL LAGO

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.