

L200000096992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

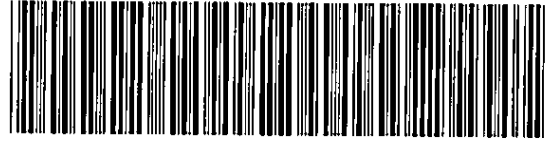
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FL

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N. CULLIGAN

APR 7 2020

**CORPORATE
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PICK UP: 04/06/2020

- ☐ **CERTIFIED COPY** _____
- xx** **PHOTOCOPY** _____
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- xx** **FILING** LLC _____

1. **IDEAL MENTAL HEALTH AND WELLNESSCARE, LLC**
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

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**ARTICLES OF ORGANIZATION
OF
IDEAL MENTAL HEALTH AND WELLNESS CARE, LLC**

SECRETARY OF STATE
TALLAHASSEE, FL

The undersigned, being the Members and Organizers of the Limited Liability Company hereby being formed under the Florida Statutes Annotated Sections 605.0201, do hereby adopt the following Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is IDEAL MENTAL HEALTH AND WELLNESS CARE, LLC

SECOND: The Limited Liability is organized to engage in any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company may be organized in accordance with the Florida Statutes Annotated Sections 605.0201, including all powers and purposes now and hereafter permitted by law to a limited liability company.

THIRD: The mailing and street address of the principal office of the Limited Liability Company is 6288 Blakeford Dr, Windermere, FL 34786.

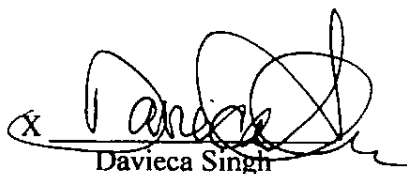
FOURTH: The street address of the initial registered office of the Limited Liability Company in Florida is 6288 Blakeford Dr, Windermere, FL 34786 and the name of the Initial registered agent of the Limited Liability Company in Florida at that address is Davieca Singh.

FIFTH: The members of the Limited Liability Company shall consist of not less than one Member. The name and address of the initial Members are:

Davieca Singh (AMBR)
6288 Blakeford Dr
Windermere, FL 34786

SIXTH: The Limited Liability Company is to be managed by the Members.

IN WITNESS WHEREOF, the Members have executed and acknowledged these Articles of Organization on April 6, 2020.

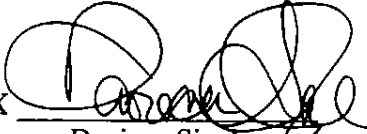

Davieca Singh

**CONSENT TO APPOINTMENT
BY REGISTERED AGENT**

I, having been named as Registered Agent for IDEAL MENTAL HEALTH AND WELLNESS CARE, LLC hereby voluntarily consent to serve as Registered Agent for IDEAL MENTAL HEALTH AND WELLNESS CARE, LLC

I know and understand the duties and responsibilities of a Registered Agent as set forth in the Florida Statutes Annotated Sections 605.0201, and I hereby accept those duties and responsibilities.

Dated: April 6, 2020

X 
Davieca Singh

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SECRETARY OF STATE
TALLAHASSEE, FL