

L20000178968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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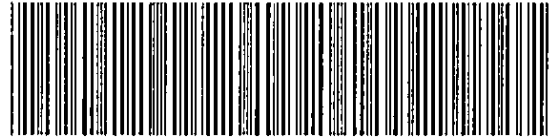
(Business Entity Name)

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COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 07/01/2020

Name: Merritt Walker

Reference #: 1239279

Entity Name: ODYSSEY WELLNESS LLC

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY OF THE FILING EVIDENCE

Authorized Amount: \$155

Signature: MW

**ARTICLES OF ORGANIZATION
OF
ODYSSEY WELLNESS LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is:

ODYSSEY WELLNESS LLC

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

**3930 N.E. 31st Avenue
Lighthouse Point, Florida 33064**

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

**Cogency Global, Inc.
115 North Calhoun Street, Suite 4
Tallahassee, Florida 32301**

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 as provided for in Chapter 605, F.S.

Cogency Global, Inc., Registered Agent

By: Merritt Walker
Name: Merritt Walker
Title: Asst. Secretary


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ARTICLE IV: - Management

The name and address of the individual authorized to manage and control the Limited Liability Company is:

<u>Title</u>	<u>Name and Address</u>
MGR	Scott Frohman 3930 N.E. 31 st Avenue Lighthouse Point, Florida 33064

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on June 30, 2020.



Sean Coyle, Authorized Signer

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.)

Sean Coyle
Typed or printed name of signee