

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

L20000257742
FILED 8:00 AM
August 20, 2020
Sec. Of State
jafason

Article I

The name of the Limited Liability Company is:
WARRIOR WELLNESS CLINIC LLC

Article II

The street address of the principal office of the Limited Liability Company is:
404 SW 140TH TERRACE, SUITE 30
NEWBERRY, FL. 32669

The mailing address of the Limited Liability Company is:
9910 NW 57TH PL
GAINESVILLE, FL. 32653

Article III

The name and Florida street address of the registered agent is:
CARLY DODD
404 SW 140TH TERRACE, SUITE 30
NEWBERRY, FL. 32669

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: CARLY DODD

Article IV

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

Title: AP
TERRI DAVIS
9910 NW 57TH PL
GAINESVILLE, FL. 32653

Title: AP
JOHNATHAN RICHARDS
9910 NW 57TH PL
GAINESVILLE, FL. 32653

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Signature of member or an authorized representative

Electronic Signature: TERRI DAVIS

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.