# Electronic Articles of Organization For Florida Limited Liability Company

L21000086040 FILED 8:00 AM March 01, 2021 Sec. Of State wlawrence

#### Article I

The name of the Limited Liability Company is: KEETON WELLNESS CENTER LLC

#### Article II

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

1070 MONTGOMERY RD SUITE 2107 ALTAMONTE SPRINGS, FL. UN 32714

The mailing address of the Limited Liability Company is:

PO BOX 470341 LAKE MONROE, FL. 32747

### **Article III**

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

SHEROD M MITCHELL 920 W 11TH ST SANFORD, FL. 32771

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: SHEROD MITCHELL

## **Article IV**

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

Title: MGR SHEROD M MITCHELL 920 W 11TH ST SANFORD, FL. 32771 UN

Title: AMBR JULIA STARLING 107 ELISSAR DR SANFORD, FL. 32713 L21000086040 FILED 8:00 AM March 01, 2021 Sec. Of State wlawrence

Signature of member or an authorized representative

Electronic Signature: SHEROD M. MITCHELL

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.