

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

**L21000508199
FILED 8:00 AM
November 30, 2021
Sec. Of State
jafason**

Article I

The name of the Limited Liability Company is:

QUALITY THERAPEUTIC HEALTH SERVICES LLC

Article II

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

6401 S WEST SHORE BLVD
STE 619
TAMPA, FL. US 33616

The mailing address of the Limited Liability Company is:

PO BOX 130341
TAMPA, FL. US 33681

Article III

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

ZENBUSINESS INC.
336 E. COLLEGE AVE.
SUITE 301
TALLAHASSEE, FL. 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.

Registered Agent Signature: MITCH WILDE

Article IV

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

Title: AMBR
MIRIAM WASSERMAN
4520 W. OAKELLAR AVENUE # 130341
TAMPA, FL. 33611 US

Title: AMBR
SAMIRA MOHMAND
4520 W. OAKELLAR AVENUE # 130341
TAMPA, FL. 33611 US

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Signature of member or an authorized representative

Electronic Signature: MIRIAM WASSERMAN

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.