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(Re	equestor's Name)	
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Certified Copies	_ Certificates	of Status
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S. CHATHAM
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## COVER LETTER

	lew Filing Sec Division of Cor				
SUBJECT		Wellness LLC			
SUBJECT	· ·	Name of L	imited Liabil	ity Company	
The enclos	sed Anicles of	Organization and fee(s) a	are submitted	for filing.	
Please retu	irn all correspo	indence concerning this r	natter to the f	following:	
	Jacqueline F	. Alcantara			
			Name of	Person	
	D' Avalon W	Tellness LLC			
			Firm/Co	mpany	
	17607 Brigh	ton Lake Road			
	<del></del>		Addr	ess	
	Land O. Lak	es, FL 34638			
	balcantara@n		City/State an	d Zip Code	
		E-mail address: (to be use	od for future s	unnual mont notificatio	
For further		neerning this matter, plea		illingar report nonnearto	,
	Jacqueline F.	Alcantara at (	724	504-1231	
	Nam		Arca Code	Daytime Telephone	Number
Enclosed	is a check for t	he following amount:			
□\$125.00	) Filing Fee	☐\$130,00 Filing Fee of Certificate of Status	Cenifi	5.00 Filing Fcc & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section Div The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	ssee SSS T

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

D' Avalon Wellness I	LC		
(Must cona	tin the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
he mailing address and street ad	dress of the principal o	ffice of the Limited	Liability Company is:
Principa	d Office Address:		Mailing Address:
17607 Brighton Lake	Road	176	07 Brighton Lake Road
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a	nt, Registered Office, cannot serve as its own	& Registered Agent.	d O. Lakes, FL 34638 nt's Signature:
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registratio	& Registered Agent. n.)	d O. Lakes, FL 34638 nt's Signature:
ARTICLE III - Registered Age	nt, Registered Office, cannot serve as its own ctive Florida registratio	& Registered Agent. n.)	d O. Lakes, FL 34638 nt's Signature:
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registratio	& Registered Agent. Registered Agent. n.)	d O. Lakes, FL 34638 nt's Signature:
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registration ddress of the registered	& Registered Agent. Registered Agent. n.)	d O. Lakes, FL 34638 nt's Signature:
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registration ddress of the registered	& Registered Agent. Registered Agent. n.) l agent are: tra Name	d O. Lakes, FL 34638 nt's Signature:
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registration ddress of the registered Jacqueline F. Alcanta	& Registered Agent. Registered Agent. n.) Lagent are: ura Name	d O. Lakes, FL 34638  nt's Signature: You must designate an individu
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registration ddress of the registered Jacqueline F. Alcanta 17607 Brighton Lake	& Registered Agent. Registered Agent. n.) Lagent are: ura Name	d O. Lakes, FL 34638  nt's Signature: You must designate an individu

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..

Registered Agent's Signature (REQUIRED

(CONTINUED)



#### ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

**MBR	AMBR    Jaconeline F. Alcantara     17607 Brighton Lake Road     Jand O. Lakes, Fl. 34638     Jand O.	"AMBR" = Authorized Member	
AMBR    Jacoucline F. Alcantara   17607 Brighton Lake Road   1 and O. Lakes, Fl. 34638	AMBR  Jaconcline F. Alcantara 17607 Brighton Lake Road Land O. Lakes, Fl. 34638  Theodore J. Alcantara 17607 Brighton Lake Road Land Olakes, Fl. 34638  W. Effective date, if other than the date of filing:  (OPTIONAL) tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) e date inserted in this block does not meet the applicable statutory filing requirements, this date will not ent's effective date on the Department of State's records.  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.203 (1) (b). Florida Statutes 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 s.817.155, F.S.  Jacqueline F. Alcantara Typed or printed name of signee  Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certificate of Status (Optional)	"MGR" = Manager	
AMBR  Theodore J. Alcantara 17607 Brighton Lake Road Land O. Lakes, Fl. 34638  Theodore J. Alcantara 17607 Brighton Lake Road Land O. Lakes, Fl. 34638  EV: Effective date, if other than the date of filing:  (OPTIONAL)  EV: Effective date, if other than the date of filing:  (OPTIONAL)  (OPTIONA	Theodore J. Alcantara 17607 Brighton Lake Road Land O. Lakes, Fl. 34638  Theodore J. Alcantara 17607 Brighton Lake Road Land O. Lakes, Fl. 34638  W. Effective date, if other than the date of filing: (OPTIONAL) tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) e date inserted in this block does not meet the applicable statutory filing requirements, this date will not ent's effective date on the Department of State's records.  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 603,0203 (1) (b), Florida Statutes. 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 s.817.155, F.S.  Jaconeline F. Alcantara Typed or printed name of signee  Filing Fees. S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)	o a	Jacqueline F. Alcantara
AMBR  Theodore J. Alcantara 17607 Brighton Lake Road Land OLakes, FL 34638  (Use attachment if necessary)  E.V.: Effective date, if other than the date of filing:  (OPTIONAL)  setive date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.  E.V.: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,020 (1) (b), Florida Statutes, 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 s.817.155, F.S.  Jacqueline F. Alcantara  Typed or printed name of signee  Filing Fees.  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)  \$5.00 Certificate of Status (Optional)	I and O. Lakes, FL 34638  Theodore J. Alcantara 17607 Brighton Lake Road Land OLakes, FL 34638  V: Effective date, if other than the date of filing:  (OPTIONAL)  tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.)  e date inserted in this block does not meet the applicable statutory filing requirements, this date will not mit's effective date on the Department of State's records.  VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes.  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 s.817.155, F.S.  Jacqueline F. Alcantara  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  \$30.00 Certified Copy (Optional)	TAUDIN	17607 Brighton Lake Road
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(Use attachment if necessary)  E V: Effective date, if other than the date of filing:	Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes 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 s.817,155, F.S.  Jacqueline F. Alcantara  Typed or printed name of signee  Filing Fees:		Land OLakes, FL 34638
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### D' Avalon Wellness LLC 17607 Brighton Lake Road Land O. Lakes, FL

#### **INITIAL LIST OF MEMBERS**

The following named person(s) shall constitute the initial members of D' Avalon Wellness LLC:

Jacqueline F. Alcantara 17607 Brighton Lake Road Land O. Lakes, FL 34638

Theodore J. Alcantara 17607 Brighton Lake Road Land OLakes. FL 34638

Jacqueline F. Alcantara, Organizer

Date

