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Division of Corporations

Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : BARNETT, KIRKWOOD, KOEHE, LONG & FOSTER, P.A.
Account Number : 072731001155
Phone : (813)253-2020
Fax Number : (813)251-6711

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: tseemann@barnettbolt.com

**FLORIDA LIMITED LIABILITY CO.
GLH MED SPA, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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H22000172202

**ARTICLES OF ORGANIZATION
OF
GLH MED SPA, LLC**

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act, and pursuant to the following Articles of Organization:

ARTICLE 1
Name

The name of this limited liability company is:

GLH MED SPA, LLC

(hereafter, the "Company").

ARTICLE 2
Effective Date

The Company shall have perpetual existence, commencing on the date that these Articles of Organization are filed with the Florida Department of State.

ARTICLE 3
Mailing Address and Principal Office

The address of the principal office of the Company is 403 Vonderburg Drive, Brandon, FL 33511. The mailing address of the Company is P.O. Box 2677, Brandon, FL 33509.

ARTICLE 4
Initial Registered Office and Agent

The street address of the initial registered office of the Company is 601 Bayshore Boulevard, Suite 700, Tampa, Florida 33606, and the name of the initial registered agent of the Company at that address is David L. Koche.

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ARTICLE 5
Management of the Company

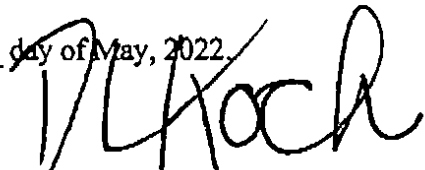
The Company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of the initial manager of the Company are:

Gregory L. Henderson
403 Vonderburg Drive
Brandon, FL 33511

ARTICLE 6
Indemnification

The Company shall indemnify its managers and members to the fullest extent authorized by law.

IN WITNESS WHEREOF, the undersigned authorized representative of the member has executed these Articles of Organization this 13TH day of May, 2022.



DAVID L. KOCH, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE OF
GLH MED SPA, LLC**

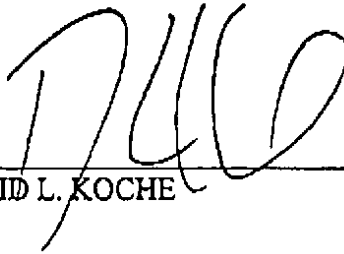
Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is: GLH MED SPA, LLC
2. The name and address of the registered agent and office are:

David L. Koche
601 Bayshore Boulevard, Suite 700
Tampa, Florida 33606

The undersigned, 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, hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accept the obligations of his position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated the 13th day of May, 2022.



DAVID L. KOCHÉ

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TAMPA, FLORIDA

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