

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

**L22000251222  
FILED 8:00 AM  
June 01, 2022  
Sec. Of State  
bcoates**

**Article I**

The name of the Limited Liability Company is:

TRUSTED HANDS HEALTH AND WELLNESS LLC

**Article II**

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

4110 SW 34 TH STREET SUITE 24  
24  
GAINESVILLE, FL. 32653

The mailing address of the Limited Liability Company is:

2165 NW 78 PLACE  
GAINESVILLE, FL. 32609

**Article III**

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

SHANORA CURRY  
2165 NW 78 PLACE  
GAINESVILLE, FL. 32609

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: SHANORA CURRY

## **Article IV**

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

Title: MGR  
SHANORA CURRY  
2165 NW 78 PLACE  
GAINESVILLE, FL. 32609

Title: MGR  
TOMIKO MCHENRY  
2165 NW 78 PLACE  
GAINESVILLE, FL. 32609

Signature of member or an authorized representative

Electronic Signature: SHANORA CURRY

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.