Electronic Articles of Organization
For
Florida Limited Liability Company

L22000498545
FILED 8:00 AM
November 22, 2022
Sec. Of State
jafason

Article I

The name of the Limited Liability Company is:

THERAPEUTIC EXPRESSIONS LLC

Article II

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

217 SE 1ST AVE
SUITE 200-55
OCALA, . 34471

The mailing address of the Limited Liability Company is:

P.O. BOX 770481
OCALA, . 34477

Article III

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

LASHAUNIA D BROOKS
4405 SW 44TH ST
OCALA, FL. 34474

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: LASHAUNIA BROOKS

Article IV

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

Title: AR
LASHAUNIA BROOKS
4405 SW 44TH ST
OCALA, FL. 34474

Title: MGR
JOVAN A BROOKS
4405 SW 44TH ST
OCALA, FL. 34474

Signature of member or an authorized representative

Electronic Signature: LASHAUNIA BROOKS

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.