

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

**L22000520630
FILED 8:00 AM
December 12, 2022
Sec. Of State
dlokeefe**

Article I

The name of the Limited Liability Company is:

LIMITLESS CARE CLINIC PLLC

Article II

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

1110 BELL SHOALS ROAD
STE 102
BRANDON, FL. US 33511

The mailing address of the Limited Liability Company is:

1110 BELL SHOALS ROAD
STE 102
BRANDON, FL. US 33511

Article III

Other provisions, if any:

MEDICAL DOCTOR OPENING A PRACTICE IN FLORIDA TO TREAT
PATIENTS

Article IV

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

AHMAD ALSARAH MD
1110 BELL SHOALS ROAD
STE 102
BRANDON, FL. 33511

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: AHMAD ALSARAH

Article V

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

Title: AP
KATIE MELLINGER
1471 S. ELMS ROAD
FLINT, MI. 48532 US

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Article VI

The effective date for this Limited Liability Company shall be:

12/09/2022

Signature of member or an authorized representative

Electronic Signature: KATIE MELLINGER

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.