

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

**L23000461888
FILED 8:00 AM
October 06, 2023
Sec. Of State
aanderson**

Article I

The name of the Limited Liability Company is:

MOVEMENT CHIROPRACTIC AND WELLNESS CENTER LLC

Article II

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

7250 RED BUG LAKE RD
SUITE 1028
OVIDO, FL. FL 32765

The mailing address of the Limited Liability Company is:

7250 RED BUG LAKE RD
SUITE 1028
OVIDO, FL. FL 32765

Article III

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

SAIRA PARENTEAU
5322 HIDDEN CYPRESS LANE
OVIDO, FL. 32765

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: SAIRA PARENTEAU

Signature of member or an authorized representative

Electronic Signature: SAIRA PARENTEAU

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.