

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

**L24000243500  
FILED 8:00 AM  
May 28, 2024  
Sec. Of State  
mkanderson**

**Article I**

The name of the Limited Liability Company is:

GONSTEAD CHIROPRACTIC CLINIC OF EAST FLORIDA LLC

**Article II**

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

1200 FLORAL SPRINGS BLVD  
UNIT 27206  
PORT ORANGE, FL. US 32129

The mailing address of the Limited Liability Company is:

1200 FLORAL SPRINGS BLVD  
UNIT 27206  
PORT ORANGE, FL. US 32129

**Article III**

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

LINDY E BAIRD  
1200 FLORAL SPRINGS BLVD  
UNIT 27206  
PORT ORANGE, FL. 32129

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: LINDY BAIRD

## **Article IV**

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

Title: CEO  
LINDY E BAIRD  
1200 FLORAL SPRINGS BLVD UNIT 27206  
PORT ORANGE, FL. 32129 US

Title: CEO  
ERIC D VARGA  
1200 FLORAL SPRINGS BLVD UNIT 27206  
PORT ORANGE, FL. 32129 US

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Signature of member or an authorized representative

Electronic Signature: LINDY BAIRD

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.