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Florida Department of State
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Account Name : CORPOLICENSE, INC
Account Number : I20050000118
Phone : (305)774-9600
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FLORIDA LIMITED LIABILITY CO.
NKA WELLNESS, LLC

Certificate of Status	0
Certified Copy	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF NKA WELLNESS, LLC

ARTICLE I - NAME:

The name of the Limited Liability Company is:

NKA WELLNESS, LLC

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ARTICLE II - ADDRESS:

The mailing and principal address of the Limited Liability Company is:

PRINCIPAL ADDRESS: 3934 SW 8th Street # 308
Coral Gables, Florida 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The Registered Agent designated is: NANCY-KAREN ALVAREZ

NANCY KAREN ALVAREZ
3934 SW 8th Street # 308
Coral Gables, Florida 33134

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 as provided for in Chapter 605, F.S.

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ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

TITLE:	NAME AND ADDRESS
MGR	NANCY-KAREN ALVAREZ 3934 SW 8th Street # 308 Coral Gables, Florida 33134

Nancy-Karen Alvarez
Manager

11/01/2024

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(In accordance with section 605.0201, Florida Statutes,
The execution of this document constitutes an affirmation under
The penalties of perjury that the facts stated herein are true)

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