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To:		. •		~
	Division of Corporations			2024
	Fax Number	: (850)617-6381		4 DEC
From:			•	J
	Account Name	: CAPITOL SERVICES, INC.	.,,,,,,	26
	Account Number	: I20160000017	1.2 -1,	•
	Phone	: (855)498-5500	- 13	70
	Fax Number	: (800)432-3622		PH II:
		s for this business entity to be used	for future	28
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FLORIDA LIMITED LIABILITY CO. IQCentRX, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION OF IQCENTRX, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is IQcentRX, LLC

ARTICLE II: - Address

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

2875 South Ocean Boulevard Suite 200-08 Palm Beach, FL 33480

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

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

Thomas Maxwell Baumer, Jr. 2875 South Ocean Boulevard Suite 200-08 Palm Beach, FL 33480

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.

Thomas Maxwell Baumer, Jr., as Registered Agent

Thomas Maxwell Baumer, Jr.

Name: Thomas Maxwell Baumer, Jr.

Title: Registered Agent

ARTICLE IV: - Management

The name and address of each person authorized to manage and control the limited liability company is as follows:

Title: Name and Address:

MGR John Theobald

2875 South Ocean Boulevard, Suite 200-08

Palm Beach, FL 33480

* * * *

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization
on December 26, 2024.
Signed by:
John Theobald
DDC12DD77ECMM_
John Theobald, Signature of a member
(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.)
John Theobald
Typed or printed name of signee

2024 DEC 26 PK11: 28