

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

L21000086040  
FILED 8:00 AM  
March 01, 2021  
Sec. Of State  
wlawrence

**Article I**

The name of the Limited Liability Company is:  
KEETON WELLNESS CENTER LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
1070 MONTGOMERY RD  
SUITE 2107  
ALTAMONTE SPRINGS, FL. UN 32714

The mailing address of the Limited Liability Company is:  
PO BOX 470341  
LAKE MONROE, FL. 32747

**Article III**

The name and Florida street address of the registered agent is:  
SHEROD M MITCHELL  
920 W 11TH ST  
SANFORD, FL. 32771

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: SHEROD MITCHELL

## Article IV

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

Title: MGR  
SHEROD M MITCHELL  
920 W 11TH ST  
SANFORD, FL. 32771 UN

Title: AMBR  
JULIA STARLING  
107 ELISSAR DR  
SANFORD, FL. 32713

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Signature of member or an authorized representative

Electronic Signature: SHEROD M. MITCHELL

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.