

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

L25000010018  
FILED 8:00 AM  
January 06, 2025  
Sec. Of State  
crico

**Article I**

The name of the Limited Liability Company is:  
OPTIMAL THERAPY BY CHRIS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
5005 9TH AVE S  
GULFPORT, FL. 33707

The mailing address of the Limited Liability Company is:  
5005 9TH AVE S  
GULFPORT, FL. 33707

**Article III**

Other provisions, if any:  
OFFER THERAPEUTIC MASSAGE WITH A VARIETY OF MASSAGE  
MODALITIES

**Article IV**

The name and Florida street address of the registered agent is:  
CHRISTOPHER A HANNAY  
5005 9TH AVE S  
GULFPORT, FL. 33707

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: CHRISTOPHER HANNAY

**Article V**

The effective date for this Limited Liability Company shall be:  
12/31/2024

Signature of member or an authorized representative  
Electronic Signature: CHRISTOPHER HANNAY

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.