

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

L25000148530  
FILED 8:00 AM  
March 27, 2025  
Sec. Of State  
kcostello

**Article I**

The name of the Limited Liability Company is:  
SWFL MOBILE THERAPY HOLDINGS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
6 CAYMAN CT  
FORT MYERS, FL. US 33912

The mailing address of the Limited Liability Company is:  
6 CAYMAN CT  
FORT MYERS, FL. US 33912

**Article III**

The name and Florida street address of the registered agent is:  
DLF REGISTERED AGENT SERVICE, LLC  
10181 SIX MILE CYPRESS PKWY  
STE C  
FORT MYERS, FL. 33966

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: MICHAEL A. SCOTT

## Article IV

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

Title: MGR  
SHAWN TROYER PTA LLC  
6 CAYMAN CT  
FORT MYERS, FL. 33912 US

Title: MGR  
PANACEA'S THERAPY CARE LLC  
1531 PLACIDA RD BUILD 6 UNIT 104  
ENGLEWOOD, FL. 34223 US

Signature of member or an authorized representative

Electronic Signature: JOSHUA O. DORCEY

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.

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