

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

**L25000182721
FILED 8:00 AM
April 16, 2025
Sec. Of State
fjeggleston**

Article I

The name of the Limited Liability Company is:
FLORIDA PAIN MANAGEMENT CLINIC LLC

Article II

The street address of the principal office of the Limited Liability Company is:
3260 MURRELL ROAD
ROCKLEDGE, FL. US 32955

The mailing address of the Limited Liability Company is:
3260 MURRELL ROAD
ROCKLEDGE, FL. US 32955

Article III

The name and Florida street address of the registered agent is:
THE HEALTHCARE BUSINESS LAW FIRM PLLC
4400 N FEDERAL HIGHWAY
SUITE 27
BOCA RATON, FL. 33431

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: RACHEL BROUGHTON

Article IV

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

Title: MBR
CORY SCHMITZ HANFLINK
3260 MURRELL ROAD
ROCKLEDGE, FL. 32955 US

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Article V

The effective date for this Limited Liability Company shall be:

04/16/2025

Signature of member or an authorized representative

Electronic Signature: CORY HANFLINK

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.