

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

**L25000225293
FILED 8:00 AM
May 12, 2025
Sec. Of State
klovelace**

Article I

The name of the Limited Liability Company is:

ELEVATED THERAPY FL LLC

Article II

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

4100 WEST KENNEDY BLVD
SUITE 310
TAMPA, FL. 33609

The mailing address of the Limited Liability Company is:

4100 WEST KENNEDY BLVD
SUITE 310
TAMPA, FL. 33609

Article III

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

HAMILTON & ASSOCIATES CPA LLC
3447 BROOK CROSSING DR.
BRANDON, FL. 33511

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: DEBORAH RIGGS

Article IV

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

Title: AMBR
NICOLE HEAD THERAPY LLC
11517 SOUTHERN CREEK DR
GIBSONTON, FL. 33534

Title: AMBR
BETHESDA REVIVE COUNSELING SERVICES LLC
6825 ARMAND DR
TAMPA, FL. 33634

L25000225293
FILED 8:00 AM
May 12, 2025
Sec. Of State
klovelace

Signature of member or an authorized representative

Electronic Signature: NICOLE HEAD

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.