

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

L25000283102  
FILED 8:00 AM  
June 17, 2025  
Sec. Of State  
mhhitchcock

**Article I**

The name of the Limited Liability Company is:  
GAINESVILLE FASCIAL THERAPY LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
7731 W NEWBERRY ROAD  
A2  
GAINESVILLE, FL. 32607

The mailing address of the Limited Liability Company is:  
7731 W NEWBERRY ROAD  
A2  
GAINESVILLE, FL. 32607

**Article III**

The name and Florida street address of the registered agent is:  
SHELBY KRAFT  
232 SW OKALOOSA GLEN  
LAKE CITY, FL. 32024

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: SHELBY KRAFT

## **Article IV**

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

Title: MGR  
SHELBY KRAFT  
232 SW OKALOOSA GLEN  
LAKE CITY, FL. 32024

Title: MGR  
KATTIE PRATT DR  
13497 NW 2ND LANE 3-302  
NEWBERRY, FL. 32669

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Signature of member or an authorized representative

Electronic Signature: KATTIE PRATT

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.