

**Electronic Articles of Incorporation  
For**

P24000076597  
FILED  
December 20, 2024  
Sec. Of State  
mkanderson

WELLNESS PROVIDER THERAPIES, P.A.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

WELLNESS PROVIDER THERAPIES, P.A.

**Article II**

The principal place of business address:

7901 4TH ST N  
SUITE 300  
ST. PETERSBURG, FL. 33702

The mailing address of the corporation is:

7901 4TH ST N  
SUITE 300  
ST. PETERSBURG, FL. 33702

**Article III**

The purpose for which this corporation is organized is:

THE PURPOSE OF THE PROFESSIONAL ASSOCIATION IS TO PROVIDE  
MEDICAL SERVICES, AND ANY AND ALL LAWFUL BUSINESS  
ACTIVITIES ALLOWED BY A PROFESSIONAL ASSOCIATION.

**Article IV**

The number of shares the corporation is authorized to issue is:

10,000

**Article V**

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

NORTHWEST REGISTERED AGENT LLC  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL. 33702

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: MATTHEW STEVENS

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## Article VI

The name and address of the incorporator is:

MATTHEW STEVENS  
686 BURKHILL LANE

NORTH SALT LAKE, UT 84054

Electronic Signature of Incorporator: MATTHEW STEVENS

I am the incorporator submitting these Articles of Incorporation 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 this corporation and every year thereafter to maintain "active" status.

## Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
DANIEL BRYAN  
7901 4TH ST N, STE 300  
ST. PETERSBURG, FL. 33702