



202565619540



STATE OF CALIFORNIA Office of the Secretary of State ARTICLES OF ORGANIZATION CA LIMITED LIABILITY COMPANY

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: 202565619540 Date Filed: 2/6/2025

Limited Liability Company Name	
Limited Liability Company Name	Thrive Therapy and Fitness, LLC.
Initial Street Address of Principal Office of LLC	
Principal Address	11170 AQUA VISTA STREET
	APARTMENT B103
	STUDIO CITY, CA 91602
Initial Mailing Address of LLC	
Mailing Address	11170 AQUA VISTA STREET
	APARTMENT B103
*··	STUDIO CITY, CA 91602
Attention	
Agent for Service of Process	
Agent Name	Garabed Kamarian
Agent Address	210 NORTH GLENOAKS BLVD.
	SUITE D
	BURBANK, CA 91502
Purpose Statement	
The purpose of the limited liability company	is to engage in any lawful act or activity for which a limited liability
company may be organized under the Califo	ornia Revised Uniform Limited Liability Company Act.
Management Structure	
The LLC will be managed by	One Manager
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	th on attached pages, if any, are incorporated herein by reference and
made part of this filing.	
Electronic Signature	without the information herein is true and correct and that Lam authorized by
Electronic Signature By signing, I affirm under penalty of perjury	y that the information herein is true and correct and that I am authorized by
Electronic Signature	y that the information herein is true and correct and that I am authorized by
Electronic Signature By signing, I affirm under penalty of perjury California law to sign.	
Electronic Signature By signing, I affirm under penalty of perjury	y that the information herein is true and correct and that I am authorized by $02/06/2025$