

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

L09000082929  
FILED 8:00 AM  
August 27, 2009  
Sec. Of State  
nculligan

**Article I**

The name of the Limited Liability Company is:

SOUTH FLORIDA COMPREHENSIVE PSYCHOLOGY, LLC

**Article II**

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

7469 NW 4TH STREET  
PLANTATION, FL. US 33317

The mailing address of the Limited Liability Company is:

5079 NAUTICA LAKE CIRCLE  
GREENACRES, FL. 33463

**Article III**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

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

AUTUMN L CALIFANO DR.  
5079 NAUTICA LAKE CIRCLE  
GREENACRES, FL. 33463

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: AUTUMN CALIFANO

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
AUTUMN L CALIFANO DR.  
5079 NAUTICA LAKE CIRCLE  
GREENACRES,, FL. 33463 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

08/23/2009

Signature of member or an authorized representative of a member

Signature: AUTUMN CALIFANO