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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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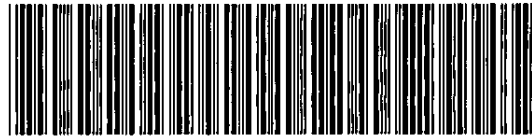
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

OCT 20 2011

CF 150.00

HMTLAW
Howze, Monaghan & Theriac, PLC

96 Willard Street, Suite 302
Cocoa, FL 32922

Your Attorneys For Life

Phone (321) 639-1320 ext. 100
Fax (321) 639-6690

October 12, 2011

Fictitious Name Registration
Division of Corporations
PO Box 1300
Tallahassee, Florida 32302-1300

Re: Fictitious Name Registration

Dear Russell:

Enclosed are the original documents for filing:

- Certificate of Conversion for "Other Business Entity" into Florida Limited Liability Company
- Articles of Organization of Limited Liability Company
- Application for Registration of Fictitious Name

Also enclosed is a check in the amount of \$200.00 to cover the fees associated with this filing.

Thank you for your help with this matter.

Sincerely,



Doreen Stallone-Pearce, L.A. to
Matthew J. Monaghan, Esq.

Enc.

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TALLAHASSEE, FLORIDA

Certificate of Conversion For "Other Business Entity"
Into
Florida Limited Liability Company

This Certificate of Conversion **and attached Articles of Organization** are submitted to convert the following **"Other Business Entity"** into a **Florida Limited Liability Company** in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: **ROBERT J. SHAPIRO, PH.D., P.A.**
2. The "Other Business Entity" is a corporation first organized, formed or incorporated under the laws of Florida on January 8, 1997.
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated: not applicable.
4. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization: PSYCHOLOGY ASSOCIATES OF BREVARD, PLC.**
5. To be effective on the date of filing.

Signed this 27th day of Sept., 2011.

Signature of Member or Authorized Representative of Limited Liability Company:
Signature of Member or Authorized Representative:


Printed Name: ROBERT J. SHAPIRO, PH.D.
Title: MANAGING MEMBER

Signature(s) on behalf of Other Business Entity:


Printed Name: ROBERT J. SHAPIRO, PH.D. Title: DIRECTOR

Fees:

Certificate of Conversion: \$25.00
Fees for Florida Articles of Organization: \$125.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION OF LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is: PSYCHOLOGY ASSOCIATES OF BREVARD, PLC

ARTICLE II — Address:

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

6767 N. Wickham Road, Suite 306
Melbourne, FL 32940

ARTICLE III — Purpose:

The purpose of the Limited Liability Company is to engage in every phase and aspect of the practice of psychology. In addition the Limited Liability Company may invest the funds of the Limited Liability Company in real estate, mortgages, stocks, bonds, or any other type of investment, and own real or personal property necessary for the rendering of professional services.

ARTICLE IV — Duration:

The period of duration for the Limited Liability Company shall be: PERPETUAL

ARTICLE V — Management:

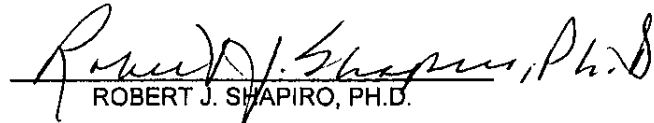
The Limited Liability Company is to be managed by the managing members and the name and address of the managing members are:

Robert J. Shapiro, PH.D.: 6767 N. Wickham Rd. STE 306, Melbourne, FL 32940
Kristopher Olsen, PH.D.: 6767 N. Wickham Rd. STE 306, Melbourne, FL 32940

ARTICLE VI — Registered Agent:

The name and address of the Registered Agent for the Limited Liability Company shall be:
Robert J. Shapiro, PH.D.: 6767 N. Wickham Rd. STE 306, Melbourne, FL 32940

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 as provided for in Chapter 608, F.S.


ROBERT J. SHAPIRO, PH.D.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 27th day of Sept., 2011.


ROBERT J. SHAPIRO, PH.D., Managing Member

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