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Florida Department of State

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	5	FLORIDA LIMITED LIABILITY CO.	JASS
	AUG	NEUROSCIENCE ASSESSMENT SERVICES FOR	9866 0 XX
	€	HEALTHCARE, LLC	F 51

Certificate of Status Certified Copy Page Count 03 \$155.00 Estimated Charge

ARTICLES OF ORGANIZATION

OF

NEUROSCIENCE ASSESSMENT SERVICES FOR HEALTHCARE, LLC

The undersigned person, having capacity to contract and act as the Organizer of a limited liability company, adopts the following Artícles of Organization for such Company under the Florida Revised Limited Liability Company Act.

- 1. Name. The name of the Company is Neuroscience Assessment Services for Healthcare, LLC.
- 2. Registered Office and Agent. The Company's initial registered agent is Hal K. Litchford, Esquire, and its initial registered office is located c/o Baker, Donelson, Bearman, Caldwell & Berkowitz, PC at 200 South Orange Avenue, Suite 2900, Orlando, Florida 32801
- 3. Organizer. The Organizer of the Company is Martha Anderson Hartley, whose address is c/o Baker, Donelson, Bearman, Caldwell & Berkowitz, PC, with an address of 200 South Orange Avenue, Suite 2900, Orlando, Florida 32801.
 - 4. Management. The Company will be manager-managed.
- 5. Principal Executive Office. The principal office of the Company is c/o Hal K. Litchford, Esquire, at Baker, Donelson, Bearman, Caldwell & Berkowitz, PC, 200 South Orange Avenue, Suite 2900, Orlando, Florida 32801.
- 6. Existence and Duration. The Company shall commence its existence on the date these Articles of Organization are filed, and its duration shall be perpetual unless sponer dissolved by law or in accordance with provisions of the Operating Agreement.

Dated: August £, 2016.

Martha Anderson Hartley, Organize

(In accordance with Section 605.0113; Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated in the Articles of Organization, 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 in Chapter 605, Florida Statutes.

Registered Agent

Halk Litchford Eso

Dated: August 4, 2016

SECRETARY OF STATE