

# LO1000014261

Judy N. Gautier  
3424 Cypress Landing Dr.  
Valrico, FL 33594  
(813) 654-9812

To Whom It May Concern:

I am writing to apply for organization as a Limited Liability Corporation. I have enclosed an application, as well as a check for \$125.00.

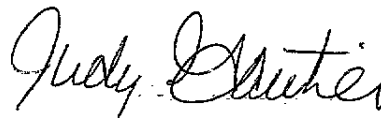
My name and address are as follows:

Judy Gautier  
Therapy Solutions, LLC  
3424 Cypress Landing Drive  
Valrico, FL 33594  
(813) 654-9812

700004542277--4  
-08/20/01--01090--012  
\*\*\*\*125.00 \*\*\*\*125.00

Please feel free to contact me with any questions regarding this matter.

Sincerely,



Judy Gautier

01 AUG 20 AM 10:44  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Name Availability	
Document Examiner	DCC
Updater	DCC
Member Verifier	DCC
Admission Management	DCC
W. P. Verifier	DCC

LO1000014261

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: Therapy Solutions, L.L.C.

## ARTICLE II - Address:

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

3424 Cypress Landing Drive  
Valrico, FL  
33594

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Judy Gautier  
Name  
3424 Cypress Landing Drive  
Florida street address (P.O. Box **NOT** acceptable)  
Valrico, FL 33594  
City, State, and Zip

*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.*

Judy N. Gautier  
Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Judy N. Gautier  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Judy N. Gautier  
Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

FILED  
AUG 20 AM 10:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA