

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

L05000020740  
FILED 8:00 AM  
March 01, 2005  
Sec. Of State  
mhodges

**Article I**

The name of the Limited Liability Company is:

JUNE D. SPIRER, PSY.D., PLLC

**Article II**

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

GLADES/ST. ANDREWS PROFESSIONAL CENTER  
2499 GLADES RD. SUITE 201  
BOCA RATON, FL. 33431

The mailing address of the Limited Liability Company is:

GLADES/ST. ANDREWS PROFESSIONAL CENTER  
2499 GLADES RD. SUITE 201  
BOCA RATON, FL. 33431

**Article III**

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

THE PURPOSE OF THE PROFESSIONAL LIMITED LIABILITY COMPANY  
IS TO ENGAGE IN EVERY ASPECT OF THE BUSINESS OF RENDERING  
PROFESSIONAL SERVICES TO THE PUBLIC THAT A CLINICAL  
PSYCHOLOGIST, DULY LICENSED UNDER THE LAWS OF FLORIDA, IS  
AUTHORIZED TO

**Article IV**

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

CARYN J CLAYMAN ESQ.  
THOMAS C. WALSER, PA  
7015 BERACASA WAY, STE 201  
BOCA RATON, FL. 33433

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: CARYN J. CLAYMAN

## **Article V**

The name and address of managing members/managers are:

Title: MGRM  
JUNE D SPIRER DR.  
3299 HARRINGTON DR.  
BOCA RATON, FL. 33496

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Signature of member or an authorized representative of a member

Signature: JUNE D. SPIRER