

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

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FILED 8:00 AM
April 06, 2005
Sec. Of State
Irrivers

Article I

The name of the Limited Liability Company is:
ARBOR PSYCHOLOGICAL SERVICES LLC

Article II

The street address of the principal office of the Limited Liability Company is:
9841 SW 55TH RD.
GAINESVILLE, FL. US 32608

The mailing address of the Limited Liability Company is:
9841 SW 55TH RD.
GAINESVILLE, FL. US 32608

Article III

The purpose for which this Limited Liability Company is organized is:
PRACTICE CLINICAL PSYCHOLOGY

Article IV

The name and Florida street address of the registered agent is:
J. CHRIS SACKELLARES
9841 SW 55TH RD.
GAINESVILLE, FL. 32608

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: J. CHRIS SACKELLARES

Article V

The name and address of managing members/managers are:

Title: MGR
J. CHRIS SACKELLARES
9841 SW 55TH RD
GAINESVILLE, FL. 32608 US

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Signature of member or an authorized representative of a member

Signature: THOMAS G. CHRISTMANN