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To:

Division of Corporations

: (850)205-0383 Fax Number

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 : (800)494-3124 Phone

Fax Number : (305)675-2811

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Joan S. Liberman, LCSW, L.L.C.

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I: NAME
The name of the Limited Liability Company is:

JOAN S. LIBERMAN, LCSW, L.L.C.

ARTICLE II: Address
The mailing address and street address of the principal office of the Limited Company is:

4419 SADDLEWORTH CIRCLE

ORLANDO, FL 32826

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

JOAN S. LIBERMAN

4419 SADDLEWORTH CIRCLE

ORLANDO, FL 32826

Having been named as registered agent 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.

JOAN S. LIBERMAN / Registered Agent's Signature

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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PAGE 2

JOAN S. LIBERMAN, LCSW, L.L.C.

ARTICLE V: MEMBERS (optional)

Managing Member:

JOAN S. LIBERMAN 4419 SADDLEWORTH CIRCLE ORLANDO, FL 32826 PILED M 9:54
PILED M 9:54

Signature of a member or an authorized representative of a member

can S. Leliman

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

JOAN S. LIBERMAN