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(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

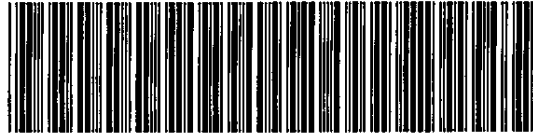
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2006 SEP 20 P 12: 21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JOHN D. CASSELS, JR., P.A.  
LAURA ANN McCALL, P.A.

LAW OFFICE OF  
**CASSELS & McCALL** *a Partnership of Professional Associations*

P. O. BOX 968 • 400 NW 2<sup>nd</sup> STREET • OKEECHOBEE, FL 34973 • TELEPHONE 863-763-3131 • FAX 863-763-1031 • E-MAIL mail@legal-one.com

August 25, 2006

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: SIMPLE SOLUTIONS OF OKEECHOBEE, PLLC

Our File No: 3944

Dear Sir/Madam:

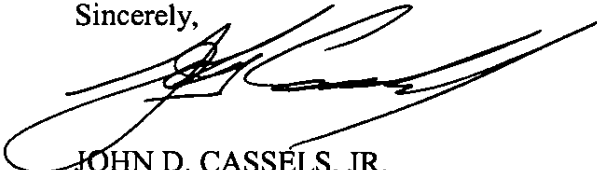
Enclosed please find an original Amended and Restated Articles of Organization for the above company. Upon your approval kindly forward to my office a certified copy of the Amended and Restated Articles of Organization for the above referenced matter.

I have also enclosed my firm's check in the amount of \$60.00 representing your filing fee for same.

Should you have any questions regarding the above, please do not hesitate to contact me or my legal assistant, Tracy.

With kindest regards, I am

Sincerely,



JOHN D. CASSELS, JR.  
JDC/tlr

Enclosures: as stated.

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2006 SEP 20 P 12:21  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**AMENDED and RESTATED  
ARTICLES OF ORGANIZATION  
OF  
SIMPLE SOLUTIONS OF OKEECHOBEE, PLLC.**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract and legally authorized to practice the profession of mental health counselor in the State of Florida, hereby proceeds to form a professional limited liability company in accordance with the Florida Professional Service Corporation Act, and hereby amends and adopts the following Articles of Organization for such professional limited liability company:

**ARTICLE I. NAME**

The name of the corporation is SIMPLE SOLUTIONS OF OKEECHOBEE, PLLC.

**ARTICLE III. PURPOSE AND NATURE OF BUSINESS**

The purposes for which the Professional Limited Liability Company is formed and the nature of its business are as follows:

1. To engage in the practice of a mental health counselor as a professional limited liability company and to own and operate a mental health office for the purposes of providing psychotherapy treatment.
2. To promote psychotherapy treatment, research and knowledge; to furnish related laboratory and clinical services; and to own real and personal property, enter into contracts, and engage in any lawful business necessary for the rendering of such professional services.
3. To do everything necessary, proper, or convenient for the accomplishment of any of the purposes herein set forth, and to do every other act incidental thereto which is not prohibited by the laws of the State of Florida or by the provisions of these Articles of Organization.

The purposes of this Organization shall be carried out only through officers, employees, and agents, each of whom is duly licensed or otherwise legally qualified to render professional mental health services in the State of Florida.

**ARTICLE III. COMMENCEMENT & DURATION**

The commencement of this Organization's existence shall be at the time of the filing of the Articles of Organization by the Secretary of State, State of Florida, filed on July 28, 2006. The duration of the Corporation shall be perpetual.

**ARTICLE IV. PRINCIPAL OFFICE AND REGISTERED AGENT**

The street address of the principal office of the Organization is 103 NW 5<sup>th</sup> Street, Okeechobee, Florida 34974, and the name of its initial registered agent and address is CATHY S.

BARBER, 2425 SW 8<sup>th</sup> Street, Okeechobee, Florida 34974. The Managing Member may from time to time move the office to any other address in the State of Florida and change the registered agent.

#### ARTICLE V. MEMBER

This Professional Limited Liability Company is to be a manager-member company and the number of Members of the Organization shall be one (1), which number may be increased pursuant to the Operating Agreement of the Organization, but shall never be less than one (1). No person shall serve as a Managing Member of the Organization unless the person is duly licensed to practice mental health services in the State of Florida. The Managing Member shall be elected by the members of the Organization. The name and street address of each person appointed to act as Managing Member until the first annual meeting or until their successors are duly chosen and qualified are as follows:

CATHY S. BARBER  
Managing Member

2425 SW 8<sup>th</sup> Street  
Okeechobee, Florida 34974

#### ARTICLE VI. MEMBER CERTIFICATES

The maximum number of member certificates of the Organization authorized to issue units of interest at any one time is ONE THOUSAND (1,000) certificates having a par value of \$1.00 per share. Such units of interest shares shall be of a single class of common stock. None of the shares of the Corporation may be issued to anyone other than an individual who is duly licensed or otherwise legally authorized to render professional mental health services in the State of Florida.

#### ARTICLE VII. SUBSCRIBERS

The name and address of the registered agent, who is the sole manager-member of this Organization, who is duly licensed in the State of Florida to practice mental health is as follows:

CATHY S. BARBER  
2425 SW 8<sup>th</sup> Street  
Okeechobee, Florida 34974

#### ARTICLE VIII. RESTRAINT ON ALIENATION

No shareholder may sell or transfer his/her member certificates in the Organization except to another individual who is eligible to be a member of the Organization under Florida law.

#### ARTICLE IX. DISQUALIFICATION

If any member, officer, agent or employee of the Organization who has been rendering professional mental health services to the public becomes legally disqualified to render such services in the State of Florida, or accepts employment that places restrictions or limitations upon his or her continued rendering of such professional services, then the Corporation shall require him or her to comply with the Florida Professional Service Corporation Act by severing all employment with and financial interests in the Corporation.

ARTICLE X. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law.

Cathy S. Barber  
CATHY S. BARBER, Incorporator

STATE OF FLORIDA  
COUNTY OF OKEECHOBEE

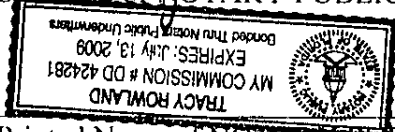
On this 18 day of September, 2006, CATHY S. BARBER, designated above as the individual who shall serve as the Organization's registered agent, (☒) who is personally known to me, or ( ) who has produced \_\_\_\_\_ as identification, personally appeared before me at the time of notarization, and, after being given the oath, acknowledged signing these Articles of Organization of SIMPLE SOLUTIONS OF OKEECHOBEE, PLLC.

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2006 SEP 20 P 12:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Tracy Rowland  
Signature of NOTARY PUBLIC



Printed Name of NOTARY PUBLIC  
My commission expires:

## **CONSENT OF REGISTERED AGENT TO ACCEPT SERVICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY STATUTES, THE UNDERSIGNED PROFESSIONAL LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1 The name of the professional limited liability company is **SIMPLE SOLUTIONS OF OKEECHOBEE, PLLC.**
2. The name and Florida street address of the registered agent and office is:

CATHY S. BARBER  
2425 SW 8<sup>th</sup> Street  
Okeechobee, Florida 34974

*Having been named as registered agent and to accept service of process for the above stated professional 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.*

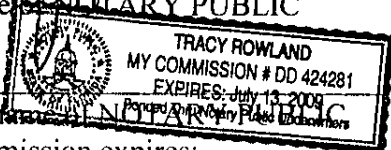
*Cathy S. Barber*  
CATHY S. BARBER, Registered Agent

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SEP 20 P 12  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

STATE OF FLORIDA  
COUNTY OF OKEECHOBEE

On this 18<sup>th</sup> day of September, 2006, CATHY S. BARBER, designated above as the individual who shall serve as the Professional Limited Liability Company's initial registered agent. ( ☒ ) who is personally known to me, or ( ) who has produced \_\_\_\_\_ as identification, personally appeared before me at the time of notarization, and, after being given the oath, acknowledged signing this Consent of Registered Agent for SIMPLE SOLUTIONS OF OKEECHOBEE, PLLC.

*Tracy Rowland*  
Signature of NOTARY PUBLIC



Printed name of NOTARY PUBLIC  
My commission expires: