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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 OCT 24 AM 11:01

1007-51528

3 Hampton OCT 25 2007

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Therapy not Included  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew R. Galloway  
(Name of Person)

Goodlette, Coleman, Johnson P.A.  
(Firm/Company)

4001 Tamiami Trail North Suite 300  
(Address)

Naples, Florida 34103  
(City/State and Zip Code)

For further information concerning this matter, please call:

Matthew Galloway at ( 239 ) 435-3535  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**GOODLETTE COLEMAN & JOHNSON, P.A.**  
**ATTORNEYS AT LAW**

Kevin G. Coleman  
J. Dudley Goodlette  
Kenneth R. Johnson  
Richard D. Yovanovich  
Edmond E. Koester

Northern Trust Bank Building  
4001 Tamiami Trail North  
Suite 300  
Naples, FL 34103  
239-435-3535  
239-435-1218 Facsimile

Linda C. Brinkman  
Gregory L. Urbancic  
William M. Burke  
Matthew L. Grabinski  
Craig D. Grider  
Matthew R. Galloway  
Matthew M. Jackson  
Alex R. Figares  
Jeffrey J. Beihoff  
Kevin L. Dees

Writer's E-mail:  
mgalloway@gcjlaw.com

October 22, 2007

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Therapy Not Included, LLC – Reference No. W07000051528

To Whom It May Concern:

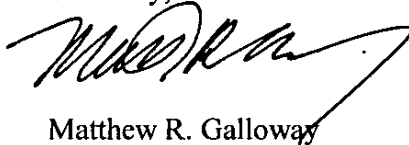
I am in receipt of your letter dated October 17, 2007, stating that the written Acceptance of the Registered Agent was missing from the filing.

Pursuant to your letter, please find enclosed the following:

- Copy of the Division of Corporations letter dated October 17, 2007;
- Original Articles of Organization with original executed Acceptance of Registered Agent attached; and
- Copy of the Articles of Organization with copy of Acceptance of Registered Agent attached.

Should you have any questions or comments, please do not hesitate to contact me at (239) 435-3535.

Sincerely,

  
Matthew R. Galloway



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

07 OCT 24 AM 7:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

October 17, 2007

MATTHEW R GALLOWAY  
GOODLETTE COLEMAN JOHNSON PA  
4001 TAMiami TRAIL NORTH - STE 300  
NAPLES, FL 34103

SUBJECT: THERAPY NOT INCLUDED, LLC  
Ref. Number: W07000051528

We have received your document for THERAPY NOT INCLUDED, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 207A00061157

**ARTICLES OF ORGANIZATION  
OF  
THERAPY NOT INCLUDED, LLC,  
a Florida Limited Liability Company**

The undersigned, being the duly authorized representative of the initial members of a limited liability company to be organized under the Florida Limited Liability Company Act, adopts and submits the following Articles of Organization for such limited liability company:

**ARTICLE I  
NAME**

The name of the limited liability company is **THERAPY NOT INCLUDED, LLC**, a Florida limited liability company (the "Company").

**ARTICLE II  
PRINCIPAL PLACE OF BUSINESS**

The mailing address and street address of the principal office of the Company shall be **1912 Fairfax Circle, Naples, Florida 34109**.

**ARTICLE III  
REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the registered agent of the Company is **1912 Fairfax Circle, Naples, Florida 34109**, and the name of the registered agent at such address is **Matthew R. Galloway**.

**ARTICLE IV  
ADMISSION OF MEMBERS**

The members of the Company may admit new members to the Company as more fully described in and subject to the terms, conditions and requirements set forth in the Company's Operating Agreement and Regulations. Newly admitted members shall have all of the rights and privileges as set forth in the Company's Operating Agreement and Regulations.

**ARTICLE V  
EFFECTIVE DATE**

The Company's effective date of existence shall begin on the date of filing of these Articles.

**ARTICLE VI  
DURATION**

The Company's duration shall be perpetual. Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or any other event that would terminate the continued membership of a member in the Company, the remaining members shall have the right to continue the business of the Company as provided in the Operating Agreement and Regulations.

**ARTICLE VII  
ADOPTION OF OPERATING AGREEMENT AND REGULATIONS**


The initial Operating Agreement and Regulations of the Company shall be adopted by its initial members. The Operating Agreement and Regulations may contain any provision for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization.

**ARTICLE VIII  
INITIAL MANAGERS**

The Company will be managed by a manager or managers, who shall be designated, appointed or elected as more fully described in the Operating Agreement and Regulations. The number of managers of the Company shall be one (1). The number of managers may be decreased or increased in accordance with the terms of the Operating Agreement and Regulations. Until such time as a successor or substitute is elected, appointed or designated in accordance with the Operating Agreement and Regulations, the Manager of the Company shall be as follows:

**MGR: Julie Galloway  
1912 Fairfax Circle  
Naples, Florida 34109**

IN WITNESS WHEREOF, the undersigned, being the duly authorized representative of the Company, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, has executed these Articles of Organization as of this 9<sup>th</sup> day of October, 2007.

By:   
Matthew R. Galloway  
Authorized Representative

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DIVISION OF CORPORATIONS  
07 OCT 24 AM 11:01

### ACCEPTANCE BY REGISTERED AGENT

I, **Matthew R. Galloway**, having been duly designated to act as registered agent and to accept service of process for THERAPY NOT INCLUDED, LLC, a limited liability company to be organized under the Florida Limited Liability Company Act, 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 am familiar with and accept the designations of my position as Registered Agent.

By:

  
Matthew R. Galloway

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