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PICK-UP WAIT MAIL

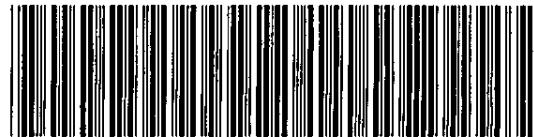
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE
APR 24 2008
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2008

DUKAREN ENGEBRETSEN
3226 NW 123RD AVE
SUNRISE, FL 33323

SUBJECT: KAREN E. ENGEBRETSEN, PSY.D, P.A.
Ref. Number: W08000018940

We have received your document for KAREN E. ENGEBRETSEN, PSY.D, P.A. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Please return 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) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 908A0002200

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dec. Karen E. Eberle-Engerson, Psy.D., LLC

(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

Dec. Karen E. Eberle-Engerson, Psy.D.

(Contact Person)

Dec. Karen E. Eberle-Engerson, Psy.D., LLC

(Firm/Company)

3226 NW 123rd Ave.

(Address)

Sunnyvale, Florida 33323

(City, State and Zip Code)

For further information concerning this matter, please call:

Dec. Karen E. Eberle-Engerson, Psy.D.

(Name of Contact Person)

at (954) 779-2855

(Area Code and Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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\$150.00 Filing Fees

(\$25 for Conversion
& \$125 for Articles
of Organization)

\$155.00 Filing Fees

and Certificate of
Status

\$180.00 Filing Fees

and Certified Copy

\$185.00 Filing Fees

Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Certificate of Conversion
For
“Other Business Entity”
Into
Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following “Other Business Entity” into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the “Other Business Entity” immediately prior to the filing of this Certificate of Conversion is:

Karen E. Engebretsen, PA PO4-140357

(Enter Name of Other Business Entity)

2. The “Other Business Entity” is a Corporation

(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida

(Enter state, or if a non-U.S. entity, the name of the country)

on Oct 11, 2004

(Enter date “Other Business Entity” was first organized, formed or incorporated)

3. If the jurisdiction of the “Other Business Entity” was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Karen E. Engebretsen, LLC

(Enter Name of Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

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5. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

Signed this 2008 day of April 2008.

Signature of Authorized Person:

Karen E. Engebretsen, Esq. Karen E. Engebretsen, Esq.
Printed Name: Karen E. Engebretsen, Esq. Title: Managing Member

Fees:

Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

Page 2 of 2

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Karen E Engebretsen, Psy.D, LLC
(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

1876 NW University DR
Ste 200F
Plantation FL 33322

Mailing Address:

P.O. Box 452889
Sunrise FL 33348

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Karen E. Engebretsen, Psy.D
3226 NW 123 Ave
Name
Florida street address (P.O. Box NOT acceptable)
Sunrise FL 33323
City, State, and Zip

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 that 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..

Karen E. Engebretsen, Psy.D
Registered Agent's Signature (REQUIRED)

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S E C Y O F S T A T E
S E C Y O F F L O R I D A

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(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

1400

Name and Address:

Kontakt B. ENGEGLERSON, P340

3226 (23 no. 86)

Sunrise, fe 333-23

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____.

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

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

10

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent

\$ 30.00 Certified Copy (Optional)

2008 APR 23 PH 3:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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