Electronic Articles of Organization
For
Florida Limited Liability Company

L08000043174
FILED 8:00 AM
April 30, 2008
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

FAMILY PSYCHOLOGICAL WELLNESS CENTER, LLC

Article II

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

7600 RED ROAD
309
MIAMI, FL. 33143

The mailing address of the Limited Liability Company is:

7600 RED ROAD
309
MIAMI, FL. 33143

Article III

The purpose for which this Limited Liability Company is organized is:

FAMILY THERAPY SERVICES

Article IV

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

AILEEN NUNEZ
7600 RED ROAD
309
MIAMI, FL. 33143

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: AILEEN NUNEZ

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Article V

The name and address of managing members/managers are:

Title: PRES
AILEEN NUNEZ
7600 RED ROAD SUITE 309
MIAMI, FL. 33183

Title: VPRE
MODESTO T NUNEZ
7600 RED ROAD SUITE 309
MIAMI, FL. 33143 FL

Article VI

The effective date for this Limited Liability Company shall be:

04/29/2008

Signature of member or an authorized representative of a member

Signature: AILEEN NUNEZ