

L090000008309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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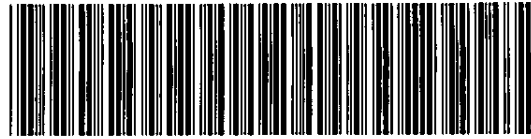
(Business Entity Name)

(Document Number)

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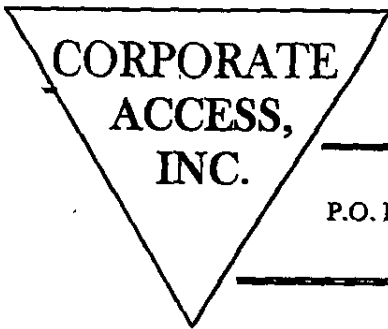
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EXAMINER



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1. Group Counseling, Com, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

**ARTICLES OF ORGANIZATION
OF
GROUPCOUNSELING.COM, LLC**

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The undersigned, a member of the Limited Liability Company, being authorized to execute and file these Articles, executes and files with the Department of State these Articles of Organization pursuant to Section 608.407, Florida Statutes, and certifies as follows:

ARTICLE I - NAME

The name of the Limited Liability Company is **GROUPCOUNSELING.COM, LLC**

ARTICLE II - LLC ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is: 5020 West Cypress Street, Suite 200, Tampa, Florida, 33607.

ARTICLE III - REGISTERED AGENT AND ADDRESS

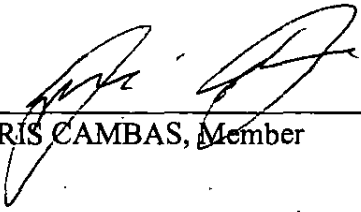
The name and street address of the initial Registered Agent for service of process in the State of Florida is:

Robert E. Morris
5020 West Cypress Street
Suite 200
Tampa, Florida 33607

ARTICLE IV - PURPOSE

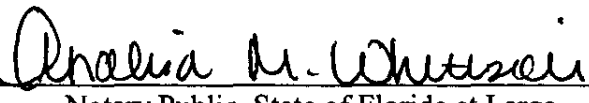
The purpose of the Limited Liability Company is to engage in counseling activities and to engage in any other lawful business(es) as permitted under the laws of the State of Florida or other state(s) of the United States.

IN WITNESS WHEREOF, the undersigned has set her hand and seal in Tampa, Hillsborough County, Florida, this 23rd day of January, 2009.



CHRIS CAMBAS, Member

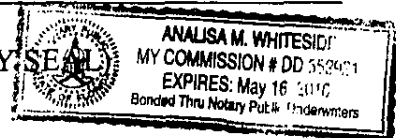
The foregoing instrument was acknowledged before me this 23rd day of January, 2009, by CHRIS CAMBAS, as a Member of GROUPOUNSELING.COM, LLC. He is personally known to me or has produced _____ as identification.



Notary Public, State of Florida at Large

My Commission Expires: _____

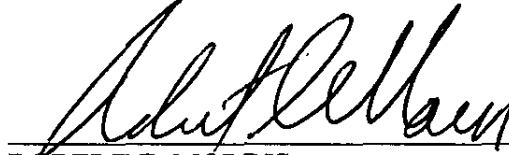
(NOTARY SEAL)



ACCEPTANCE OF REGISTERED AGENT

The undersigned, having been named as Registered Agent and to accept service of process for the above-styled Limited Liability Company at the place designated herein, does hereby accept

the appointment as Registered Agent and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of duties; and the undersigned is familiar with and accepts the obligations of the position as Registered Agent as provided for in Chapter 608, Florida Statutes.



ROBERT E. MORRIS
5020 West Cypress Street
Suite 200
Tampa, Florida 33607

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