Electronic Articles of Organization
For
Florida Limited Liability Company

L10000128451
FILED 8:00 AM
December 15, 2010
Sec. Of State
lsellers

Article I

The name of the Limited Liability Company is:

ILENE F. KASKEL, PSY.D., PLLC

Article II

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

4851 WEST HILLSBORO BLVD.
SUITE #A1
COCONUT CREEK, FL. 33073

The mailing address of the Limited Liability Company is:

11089 HARBOUR SPRINGS CIRCLE
BOCA RATON, FL. 33428

Article III

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

PSYCHOTHERAPY AND PSYCHOLOGICAL EVALUATIONS

Article IV

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

ILENE F KASKEL
11089 HARBOUR SPRINGS CIRCLE
BOCA RATON, FL. 33428

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: ILENE F. KASKEL

Article V

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The name and address of managing members/managers are:

Title: MGRM
ILENE F KASKEL
11089 HARBOUR SPRINGS CIRCLE
BOCA RATON, FL. 33428

Signature of member or an authorized representative of a member

Signature: ILENE F. KASKEL