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TALLAHASSEE, FLORIDA

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T. CLINE

JUN - 6 2011

EXAMINER

From:
Anne Mian
1812 Wingfield Dr
Longwood, FL 32779

May 20, 2011

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

Dear Sir

Enclosed please find check for \$130 (\$125 towards filing fee for Articles of Organization and Designation of Registered Agent and \$5 towards Certificate of Status).

Kindly acknowledge the receipt of the Articles of Organization.

If you have any questions feel free to contact my accountant, Renu Vardhan, at 407-574-4274 and/or renu@yashcon.com.

Sincerely



Anne Mian.

2011 JUN -3 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
FLORIDA PSYCHIATRIC ASSOCIATES LLC**

The undersigned, who is a duly licensed doctor of medicine in the State of Florida, and desires to form a professional limited liability company in accordance with the Florida Limited Liability Company Act and the Florida Professional Services Corporation, does hereby adopt the following Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is **FLORIDA PSYCHIATRIC ASSOCIATES LLC**

SECOND: The Limited Liability Company is organized for engaging in practice of medicine and to take all actions necessary or proper in connection with such practice.

THIRD: The mailing address and street address of the principal office of the Limited Liability Company is 1812 Wingfield Dr, Longwood, FL 32779

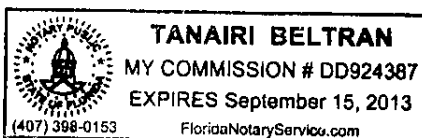
FOURTH: The street address of the initial registered office of the Limited Liability Company in Florida is 1812 Wingfield Dr, Longwood, FL 32779 and the name of the initial registered agent of the Limited Liability Company in Florida at that address is Anne F Mian.

FIFTH: The members of the Limited Liability Company shall consist of not less than one Member. The name and address of the initial Member is:

1. Anne F Mian MGRM
1812 Wingfield Dr,
Longwood, FL 32779

SIXTH: The Limited Liability Company is to be managed by the Members.

IN WITNESS WHEREOF, the Member has executed and acknowledged these Articles of Organization on May 31st, 2011.




Anne F Mian

2011 JAN -3 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

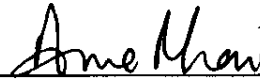
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**CONSENT TO APPOINTMENT
BY REGISTERED AGENT**

I, **Anne F Mian**, have been named as Registered Agent for **Florida Psychiatric Associates LLC** and do hereby voluntarily consent to serve as Registered Agent for **Florida Psychiatric Associates LLC**.

I know and understand the duties and responsibilities of a Registered Agent as set forth in the Florida Statutes Annotated Sections 608.401 to 608.471, and I hereby accept those duties and responsibilities.

Dated: May 31st, 2011



Anne F Mian

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