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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

SEP 19 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lindsay E. Pearce PL
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Miller

Name of Person

James Miller, esquire

Firm Company

1665 Palm Beach Lakes Blvd. suite 101

Address

West Palm Beach FL 33401

City/State and Zip Code

J.miller@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Miller

Name of Person

at (561) 762-4492

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

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

Street/Courier Address

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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA PROFESSIONAL LIMITED
LIABILITY COMPANY**

Lindsay E. Pearce PL.

ARTICLE I- Name:

The name of the Professional Limited Liability Company is:

Lindsay E. Pearce PL.

Purpose : Mental medical services

ARTICLE II- Address:

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

2929 SW 3rd Avenue, Suite 430
Miami, Florida 33129

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

The name and the Florida Street Address of the registered agent are:

James Miller
1665 Palm Beach Lakes Blvd., Ste. 101
West Palm Beach, Fl 33401

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 as provided for in Chapter 608, F.S.


James Miler Registered Agent

ARTICLE IV- Managing Member:

The name and address of each Manager who is also the Managing Member is as Follow

Title:

Name and Address:

Managing member

Lindsay E. Pearce

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TALLAHASSEE, FLORIDA

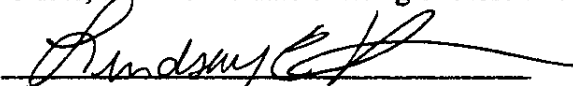
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2929 SW 3rd Avenue, Suite 430
Miami, FL 33129

ARTICLE V- Effective date, shall be the date of filing of these Articles.

SIGNATURE:


Lindsay E. Pearce, Managing Member

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