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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

APR 17 2012

EXAMINER

## COVER LETTER

**New Leaf Counseling and Psychotherapeutic Services, LLC**  
**1741 NW 107 Terrace – Suite 18, Plantation, FL 33322**

**Maureen Deutsch, MS, LMHC - MGR/MGRM**  
**1741 NW 107 Terrace – Suite 18, Plantation, FL 33322**  
**754-423-6663**

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status

**Mailing Address**

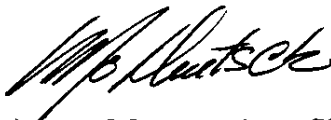
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL  
32314

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

**Street/Courier Address**

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

\$160.00



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

**TO: Registration Section Division of Corporations**

**SUBJECT:**

The enclosed Articles of Organization and fee(s) are submitted for filing.  
Please return all correspondence concerning this matter to the following:

**Maureen Deutsch, MS, LMHC**

**New Leaf Counseling and Psychotherapeutic Services, LLC**

**1741 NW 107 Terrace – Suite 18**

**Plantation, FL 33322**

**NewLeafCounseling@aol.com and MoVoltage@aol.com**

**754-423-6663**

A handwritten signature in black ink, appearing to read 'Maureen Deutsch', is written over the printed name.

**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY ARTICLE I -**

**Name:**

The name of the Limited Liability Company is:

**New Leaf Counseling and Psychotherapeutic Services, LLC**

**ARTICLE II - Address:**

**1741 NW 107 Terrace - Suite 18, Plantation, FL 33322**


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

**1741 NW 107 Terrace - Suite 18, Plantation, FL 33322**

**Principal Office Address: Mailing Address:**

**1741 NW 107 Terrace - Suite 18, Plantation, FL 33322**

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



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(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

**Maureen Deutsch, MS, LMHC**

**New Leaf Counseling and Psychotherapeutic Services, LLC**

**1741 NW 107 Terrace - Suite 18**

**Plantation, FL 33322**

*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..*

Registered Agent's Signature (REQUIRED)



**(CONTINUED) Page 1 of 2**

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title: Name and Address:**

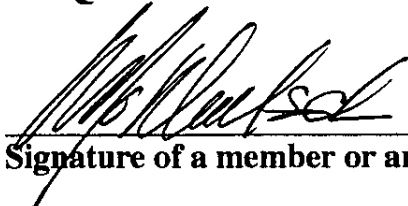
"MGR" = Manager "MGRM" = Managing Member

MGR: Maureen Deutsch MS, LMHC, 1741 NW 107 Terrace - Suite 18,  
Plantation, FL 33322

**ARTICLE V: Effective date, if other than the date of filing:**

April 9, 2012

**REQUIRED SIGNATURE:**



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**Signature of a member or an authorized representative of a member.**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided