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SECRETARY OF STATE
ALLAHASSEE ELOPER

N. Culligan APR 24 2012

COVER LETTER ...

TO: Registration Section

Division of Corporations		
SUBJECT: Jamie F. Wintz, LMHC		
Name of Limited Liability Company		
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this man	tter to the following:	
Jamie F. Wintz		
	Name of Person	
Jamie F. Wintz, LMHC		
	Firm/Company	
19124 Dawnwood Ct.		
	Address	
Jupiter, FL 33458		
	ty/State and Zip Code	
jamie.wintz@gmail.com	for future annual report notification)	
For further information concerning this matter, pleas	· ·	
Jamie F. Wintz	_at (352) 514-2562	
Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.00 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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Jamie F. Wintz, LMHC, LLC		
(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
8259 North Military Trail	19124 Dawnwood Ct. Jupiter, FL 33458	
Suite 14 Palm Beach Gardens, FL 33410	Jupiter, FL 33456	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration. Jamie F. Wintz Name 19124 Dawnwood	registered agent are:	FILED FILED AND OF S
Florida street address (P.O. Box <u>NOT</u> acceptable)		8E 2
Jupiter	_{FL} 33458	DE J
City, Sta	ate, and Zip	
Having been named as registered agent and to a liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe accept the obligations of my position as regis	this certificate, I hereby accept the a y. I further agree to comply with the erformance of my duties, and I am fa	ppointment as e provisions of all miliar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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	
Working Wallaging Wellioci	
MGR	Jamie F. Wintz
	19124 Dawnwood Ct.
	Jupiter, FL 33458
-	····
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
• ,	
	date of filing: (OPTIONAL)
· ·	specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
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DECLUDED GLOVATUDE	表現る一
<u>REQUIRED</u> SIGNATURE:	SSE LE
\sim	(電の 目
Signature of a member	or an authorized representative of a member.
	2m -
(In accordance with section 608.4	408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
I am aware that any false inform	ation submitted in a document to the Department of State
constitutes a third degree felony	as provided for in s.817.155, F.S.)
Jamie F. Wintz	
Тур	ed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)