

4600000091630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

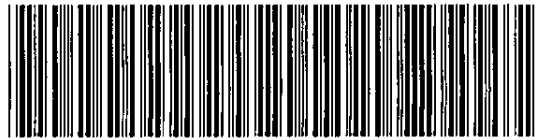
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LLC

**1. LET'S TALK SLP, LLC**

(CORPORATE NAME AND DOCUMENT #)

**2.**

(CORPORATE NAME AND DOCUMENT #)

**3.**

(CORPORATE NAME AND DOCUMENT #)

**4.**

(CORPORATE NAME AND DOCUMENT #)

**5.**

(CORPORATE NAME AND DOCUMENT #)

**6.**

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL INSTRUCTIONS:**

**LET'S TALK SLP, LLC**

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THE UNDERSIGNED SUBSCRIBES TO THESE ARTICLES OF ORGANIZATION, EACH A NATURAL PERSON COMPETENT, HEREBY ASSOCIATE THEMSELVES TOGETHER TO FORM A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA.

**ARTICLE I**

THE NAME OF THE ORGANIZATION IS:

LET'S TALK SLP, LLC

**ARTICLE II**

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS ORGANIZATION IS AS FOLLOW: TO CONDUCT BUSINESS IN THE FIELD OF SPEECH THERAPY AND ANY OTHER BUSINESS THE BOARD MAY APPROVE FROM TIME TO TIME, HAVE ONE OR MORE OFFICES IN, AND BUY, HOLD, SELL, CONVEY, LEASE OR OTHERWISE DISPOSE OF PERSONAL AND REAL PROPERTY, INCLUDING FRANCHISES, TRADEMARKS, PATENTS, COPYRIGHTS, LICENSES, IN THE STATE OF FLORIDA AND OTHER STATES AND COUNTRIES.

PREPARED BY: TURNER AND MELENDEZ ACCOUNTANTS, INC  
7540 US HIGHWAY ONE SUITE 103  
LANTANA, FL 33462  
TEL : ( 561) 582-3046 FAX : ( 561) 582-0899

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### ARTICLE III

THE INITIAL POST OFFICE ADDRESS OF THIS ORGANIZATION IS:

**4640 WINDWARD COVE LANE  
WELLINGTON, FL 33467**

PALM BEACH COUNTY, FLORIDA. THE MEMBERS, FROM TIME TO TIME, MAY MOVE THE PRINCIPLE OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

### ARTICLE IV

CERTIFICATE DESIGNATING PLACE OF DOMICILE OR BUSINESS OF SERVICE OF PROCESS IN THE STATE OF FLORIDA AND DESIGNATION OF RESIDENT AGENT FOR SERVICE OF PROCESS.

IN PURSUANCE OF F.S. 48.091, THE FOLLOWING IS SUBMITTED IN COMPLIANCE WITH SAID ACT:.

THAT DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH THE FOLLOWING PERSON DESIGNATED AS AGENT TO ACCEPT SERVICE OF PROCESS. JESSICA GARRIDO, ADDRESS: 4640 WINDWARD COVE LANE, WELLINGTON, FL 33467.

### ACKNOWLEDGMENT

HAVING BEEN NAMED BY THE ABOVE CORPORATION TO ACCEPT SERVICE OF PROCESS DESIGNATED IN THE ABOVE CERTIFICATE, I HEREBY AGREE TO ACT IN SAID CAPACITY AND TO COMPLY WITH THE PROVISIONS OF KEEPING SAID OFFICE OPEN.

BY:

JESSICA GARRIDO

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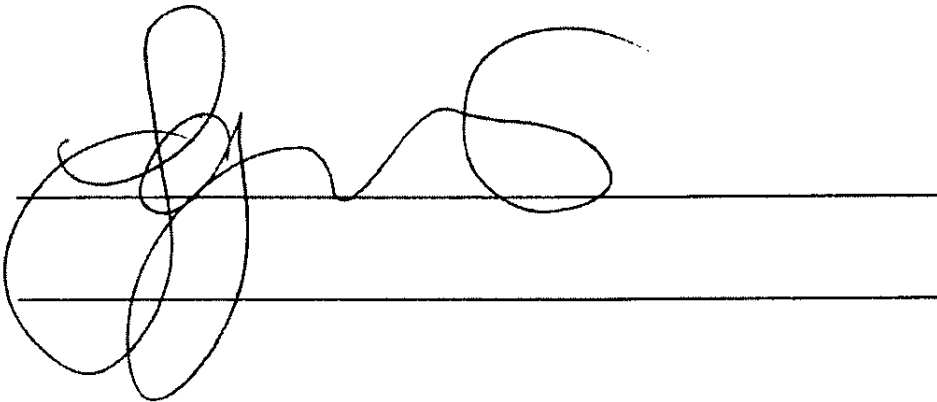
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**ARTICLE V**

THE NAME AND POST OFFICE ADDRESSE OF THE MANAGER OF ORGANIZATION:

JESSICA GARRIDO  
4640 WINDWARD COVE LANE  
WELLINGTON, FL 33467

**MANAGER'S SIGNATURE**

A handwritten signature, appearing to be 'Jessica Garrido', is written over two horizontal lines. The signature is stylized with large loops and a long horizontal stroke extending to the right.

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SECRETARY OF STATE  
711 AIRPORT BL, ORLANDO