091TBC

(F	Requestor's Name)
(<i>F</i>	Address)
	Address)
(0	City/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(E	Business Entity Name)
(0	Oocument Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:

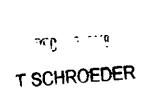
Office Use Only



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CAPITAL CONNECTION, INC.

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417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Behavior Health Hold	ings, LLC			
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend. File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
				Vehicle Search
				Driving Record
Requested by: SETH	11/30/18	3		UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
				UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

то:	New Filing Section Division of Corporations		
citions	Behavior Health Holdings, LLC,		
SUBJEC		Limited Liabili	y Company
The encl	osed Articles of Organization and feets)	are submitted	for tiling.
Please re	eturn all correspondence concerning this	matter to the fe	offowing:
	Neal L. Sandberg		
		Name of	Person
	Simon, Schindler & Sandberg, LLP		
		Firm/Cor	npany
	2650 Biscayne Blvd		
		Addre	188
	Miami, Florida 33137		
	NSandberg/g/miami-law.net	City/State and	I Zip Code
	E-mail address; (to be us	sed for future a	noual report notification)
For furthe	r information concerning this matter, ple	rase call:	
	Neal L. Sandberg	305 (576-1300
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	I is a check for the following amount:		
]\$12 5.00	Filing Fee \$130,00 Filing Fee & Certificate of Status	L_J _{Certific}	0 Filing Fee & \$160,00 Filing Fee, od Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ity Company is:					
tain the words "Limited	Liability Company, "I	.4C.," or "[.1.C.")			
address of the principal c	office of the Limited L	iability Company is:			
pal Office Address:		Mailing Addr	ess:		
oldings, LLC.	Peter I	lamilton			
da 33139	Miam	Beach, Florida 33139			
active Florida registratio	m.)	ru must designate an inc	lividual or		
Neal L. Sandberg, E	su				
	Name	-			
2650 Risesene Rhyl					
	·	eptable)			
Miami	Florida	33137			
City	State	Zip			
e, I hereby accept the apporaxisions of all statutes to this attention of my position	pointment as registered elating to the proper a as registered agent as	agent and agree to act i nd complete performanc provided for in Chapter	in this capacity, T worthward duties, and I	18 NOV 28 AN 9: 23	がに加り
	pal Office Address: Didings, LLC. Suite 302 da 33139 gent, Registered Office, by cannot serve as its own active Florida registration taddress of the registere Neal L. Sandberg, E 2650 Biscayne Blyd Florida street address Miami City Lagent and to accept serve, thereby accept the approvisions of all statutes in obligations of my position	address of the principal office of the Limited L. pal Office Address: Oldings, LLC. Peter I Suite 302 da 33139 Miami gent, Registered Office, & Registered Agent, You active Florida registration.) Caddress of the registered agent are: Neal L. Sandberg, Esq Name 2650 Biscayne Blvd Florida street address (P.O. Box NOT acc Miami Florida City State Lagent and to accept service of process for the acc, thereby accept the appointment as registered are or ovisions of all statutes relating to the proper a obligations of my position as registered agent as Registered Agent.	address of the principal office of the Limited Liability Company is: pat Office Address: Mailing Add	address of the principal office of the Limited Liability Company is: pal Office Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Oddings, LLC. Suite 302 do 33139 Miami Beach, Florida 33139 gent, Registered Office, & Registered Agent's Signature: by cannot serve as its own Registered Agent. You must designate an individual or active Florida registered agent are: Neal L. Sandberg, Esq Name 2650 Biscayne Blvd Florida street address (P.O. Box NOT acceptable) Miami Florida State Zip Agent and to accept service of process for the above stated limited liability company at the c. Thereby accept the appointment as registered agent and complete performance of my duties, and inhibitations of my position as registered agent as functive (RECHIRED)	address of the principal office of the Limited Liability Company, "L.L.C.," or "LL.C.") address of the principal office of the Limited Liability Company is: pal Office Address: Mailing Address: Mailing Address:

Title:	154 1	Name and Address:		
"AMBR" = Authoriz "MGR" = Manager	ed Member			
MGR/AMBR		Peter Hamilton		
		690 Lincoln Road- Suite 302	_	
		Miami Beach, Florida 33139	_	
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(Use attachment if no				
effective date is listed,	if other than the date of filing	g:(OPT[ONAL) od cannot be more than five business days prior to or to	90 days	after
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