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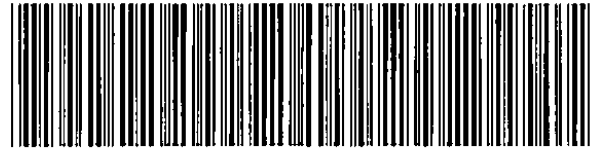
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TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

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

GULF COAST PSYCHIATRY, PLLC

Signature _____

Requested by: BA

7/10/19

Name

Date

Time

Walk-In

Will Pick Up

____ 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 _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

ARTICLES OF ORGANIZATION
OF
GULF COAST PSYCHIATRY, PLLC

The undersigned, for the purpose of forming a professional limited liability company under the Florida Liability Company Act, F.S. Chapter 605, hereby make, acknowledge, and file the following Articles of Organization:

ARTICLE I

NAME

The name of this Professional Limited Liability Company shall be **GULF COAST PSYCHIATRY, PLLC**.

ARTICLE II

ADDRESS

The mailing address is and street address of the principal office of the Company shall be **930 CENTRAL AVE, UNIT 503, ST. PETERSBURG, FL 33705**.

ARTICLE III

PERIOD OF DURATION

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall be perpetual, unless the Company is dissolved earlier as provided in the Articles of Organization or adopted by members.

ARTICLE IV

REGISTERED OFFICE AND AGENT

The initial street address in Florida of the initial registered office of the Company is **930 CENTRAL AVE, UNIT 503, ST. PETERSBURG, FL 33705** and the name of the initial registered agent at such address is **JASON PATEL**.

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ARTICLE V

PROFIT & LOSSES

1) **SHARING OF PROFITS:** The members shall be entitled to the net profits arising from the operation of professional limited liability business that remains after the payment of the expenses of operating the business of the limited liability company. Each member shall be entitled to their distributive share of the profits according to their percent of interest in the company.

2) **SHARING OF LOSSES:** All losses that occur in the operation of the professional limited liability company business shall be paid out of the capital of the professional limited liability company and the profits of the business or if such sources are insufficient to cover such losses, by the members in shares as set forth in the percentages alongside the name of each member according to their percent of interest in the company.

ARTICLES VI

CAPITAL CONTRIBUTIONS

The members of the Company shall contribute to the capital of the Company as mutually agreed by the members or as provided in the Regulations.

Each member shall make additional capital contributions to the Company only on the unanimous consent of all members or as provided in the Regulations.

ARTICLE VII

ADMISSION OF NEW MEMBERS

Except as set forth in the Regulations, no additional members shall be admitted to the Company except with the unanimous written consent of all the members of the Company and on the terms and conditions as shall be determined by all the members.

A member may transfer his or her interest in the Company as set forth in the Regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all of the members of the Company other than the member proposing to dispose of his or her interest approve of the proposed transfer by written consent.

ARTICLE VIII

MEMBER'S RIGHT TO CONTINUE BUSINESS

The Company shall be dissolved on the death, bankruptcy or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the Company, unless the business of the Company is continued by the consent of all the remaining members, provided that it has at least one remaining member.

ARTICLE IX

AMENDMENT OF ARTICLES OF ORGANIZATION

The limited liability company reserves the right to amend, alter, change or repeal any provision contained in these Articles of Organization in the manner now or hereafter prescribed by statute, and all rights conferred upon the members herein are subject to this reservation.

ARTICLE X

MANAGEMENT

The Company shall be managed by the members in accordance with Regulations adopted by the members for the management of the business and affairs of the Company. These Regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The names and addresses of the managing members of the Company are:

NAME

**JASON PATEL
AUTHORIZED MEMBER**

ADDRESS

**930 CENTRAL AVE, UNIT 503
ST. PETERSBURG, FL 33705**

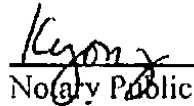
IN WITNESS WHEREOF, the undersigned organizers have made and subscribed to these Articles of Organization on this 10 day of July, 2019.


JASON PATEL

STATE OF FLORIDA

COUNTY OF SEMINOLE

The foregoing Articles of Organization were acknowledged before me this 10th day of July, 2019 by JASON PATEL, who have produced driver's licenses as identification or who are personally known to me.


Notary Public



KYONG WALLACE
Commission # GG 20158
Expires April 23, 2022
Bonded Thru Budget Notary Service

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE OF
GULF COAST PSYCHIATRY, PLLC**

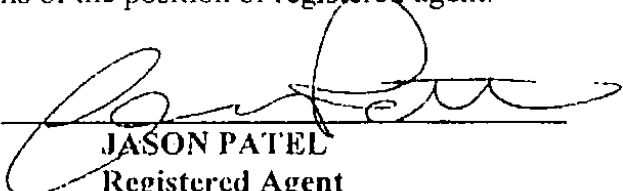
Under the provisions of F.S. 605, GULF COAST PSYCHIATRY, PLLC, submits the following statement to designate a registered office and registered agent in the state of Florida:

1. The name of the limited liability company is **GULF COAST PSYCHIATRY, PLLC**
2. The name and street address of the registered agent in Florida is:

**JASON PATEL
930 CENTRAL AVE, UNIT 503
ST. PETERSBURG, FL 33705**

The undersigned, being the person named in the Articles of Organization of **GULF COAST PSYCHIATRY, PLLC**, as the registered agent of this professional limited liability company, hereby consents to accept service of process for the above-stated Company at the place designated in this Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.

Date: July 10, 2019


JASON PATEL
Registered Agent

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TALLAHASSEE, FLORIDA

