

9/20/22, 4:39 PM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H22000326176 3)))



H220003261763ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

## To:

Division of Corporations  
Fax Number : (850)617-6381

## From:

Account Name : HOMSI LAW, P.A.  
Account Number : I20190000004  
Phone : (407)377-5507  
Fax Number : (407)377-5967

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: WILLIAM@HOMSI.LAW.FL

FLORIDA LIMITED LIABILITY CO.  
CLEAR PSYCHIATRY PLLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

2022 SEP 20 PM 4:50

22 SEP 20 PM 12:35

1122000326176 3

**ARTICLES OF ORGANIZATION  
FOR  
CLEAR PSYCHIATRY PLLC**

The undersigned, for the purpose of forming a Florida Professional Service Limited Liability Company under the Florida Professional Service Limited Liability Company Act, Florida Statutes Chapter 621, hereby makes, acknowledges, and files the following Articles of Organization.

**ARTICLE I**

The name of the Professional Service Limited Liability Company is:

CLEAR PSYCHIATRY PLLC

**ARTICLE II**

The street address of the principal office of the Professional Service Limited Liability Company is:

3202 N. HOWARD AVE., SUITE 1  
TAMPA, FLORIDA 33607

The mailing address of the Professional Service Limited Liability Company is:

3202 N. HOWARD AVE., SUITE 1  
TAMPA, FLORIDA 33607

**ARTICLE III**

The purpose for which this Professional Service Limited Liability Company is organized is to engage in the practice of psychiatry.

**ARTICLE IV**

The Articles of Organization shall be effective immediately when filed with the Secretary of State of Florida.

Large

\$1

00

22 SEP 20 PM 12:35  
FILED  
TALLAHASSEE, FLORIDA

**H**  
HOMSI LAW, P.A.

Mailing Address  
8815 Conroy-Windermere Road, #402  
Orlando, Florida 32835  
(407) 377-5507  
www.HomsiLaw.com

H22000326176 3

H22000326176 3

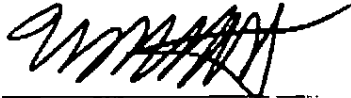
## ARTICLE V

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

HOMSI LAW, P.A.  
8815 CONROY-WINDERMERE ROAD  
#402  
ORLANDO, FLORIDA 32835

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.

Signature of Registered Agent:



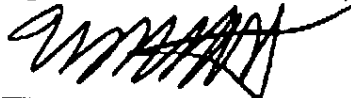
William M. Homsi, President

The Members hereby delegate the management of the PLLC to Manager(s).  
The name and address of persons(s) authorized to manage the PLLC:

Operating Manager: IFEOMA OKPALEKE

Address of the Managers and Officers being the same as the Principal Address of the PLLC.

Signature of an Authorized Representative:



William M. Homsi, Esq.

I am an authorized representative of the members submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the PLLC and every year thereafter to maintain active status.

22 SEP 20 PM 12:35  
FILED  
STATE OF FLORIDA  
DEPARTMENT OF STATE

**H**  
HOMSI LAW, P.A.

Mailing Address  
8815 Conroy-Windermere Road, #402  
Orlando, Florida 32835  
(407) 377-5507  
www.Homsilaw.com

H22000326176 3