# L95000000559

#### HARRIS, BARRETT, MANN & DEW

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July 20, 1995

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500001551505 -08/02/95--01011--016 \*\*\*\*425.00 \*\*\*\*425.00

Corporate Records Bureau Division of Corporations Department of State 409 East Gaines Street Tallahassee, FL 32399

RE: AMENDMENT TO ARTICLES OF INCORPORATION OF MAIN STREET PSYCHIATRIC ASSOCIATES, INC. CHARTER #P95000051689

ARTICLES OF ORGANIZATION OF MAIN STREET PSYCHIATRIC ASSOCIATES, L.C.

Gentlemen:

Enclosed for filing please find the following documents:

- 1. Original and copy of a Certificate of Amendment to Articles of Incorporation for Main Street Psychiatric Associates, Inc., changing the name to Warren Psychiatric Associates, Inc.;
- 2. Original and copy of Articles of Organization for Main Street Psychiatric Associates, L.C.;
- 3. Check payable to Florida Department of State in the amount of \$425.00; \$87.50 representing the filing fee of \$35.00 and certification fee of \$52.50 for the Amendment and \$337.50 for the filing fee and certified copy of Articles of Incorporation for the liability company.

SHARON L. TALA JUL 2 1 1995

\$ 250.00 FF 35.00 RA 52.50 CC \$ 337.50 Corporate Records Bureau July 20, 1995 Page 2

It would be appreciated if you would file these and forward a certified copy of each to this office. If you have any questions regarding these filings, please feel free to contact me.

Very truly yours,

HARRIS, BARRETT, MANN & DEW

Deborah Pointer Kynes

DPK/dcm Enclosures

VIA FEDERAL EXPRESS

# MAIN STREET PSYCHIATRIC ASSOCIATES, L. C. A FLORIDA LIMITED LIABILITY COMPANY

### ARTICLES OF ORGANIZATION

#### ARTICLE I - NAME:

The name of the Limited Liability Company is Main Street Psychiatric Associates, L. C.

## ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is: 121 North Osceola Avenue, Suite 300, Clearwater, Florida 34615.

#### ARTICLE III - DURATION:

The period of duration for the Limited Liability Company shall be 20 years.

#### ARTICLE IV - MANAGEMENT:

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

Frank C. Logan 121 North Osceola Avenue, Suite 300 Clearwater, Florida 34615

Donna C. Miller 121 North Osceola Avenue, Suite 300 Clearwater, Florida 34615

#### ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be that each member may assign his interest only with the unanimous consent of all other members.

### ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS:

In the event of the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company the remaining members of the limited liability company shall have the right to continue the business of the limited liability only with the consent of all remaining members.

#### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member of Main Street Psychiatric Associates, L. C. deposes and says:

- 1) the above named limited liability company has at least two members.
- 2) the total amount of cash contributed by the member(s) is \$1,000.00.
- 3) there is no property other than cash contributed by member(s).
- 4) the total amount of cash or property anticipated to be contributed by member(s) is \$10,000.00. This total includes amounts from 2 and 3 above.

Signature of a member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

Main Street Psychiatric Associates, L. C.

2. The name and address of the registered agent and office is a

Frank C. Logan 121 N. Osceola Avenue, Suite 300 Clearwater, Florida 34615

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.

(gignerure)

July 20, 1995