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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2015

JEFFREY I. LEWIS 2161 COUNTY ROAD 540A, SUITE 208 LAKELAND, FL 33813

SUBJECT: SPEECH-LANGUAGE SPECIALIST, P.L.L.C.

Ref. Number: W15000076987

We have received your document for SPEECH-LANGUAGE SPECIALIST, P.L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Need a Certificate of Existence from the NC Secretary of State - the screen print you sent is not acceptable. Please add LLC after the name of your entity to comply wth Fla. Statutes. (Speech-Language Specialist of Florida, P.L.L.C., LLC) Thank you

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 015A00026010

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 25, 2015

JEFFREY I. LEWIS 2161 COUNTY ROAD 540A, SUITE 208 LAKELAND, FL 33813

SUBJECT: SPEECH-LANGUAGE SPECIALIST, P.L.L.C.

Ref. Number: W15000076987

We have received your document for SPEECH-LANGUAGE SPECIALIST, P.L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Florida law does not provide for the recognition of a foreign professional limited liability company. An accepatable limited liability company suffix will need to be added to your entity name for this Department to accept and file your document.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 715A00024916

COVER LETTER

Registration Section Division of Corporations

TO:

	Name of Limited Liability Company							
		eign Limited Liability Comp d to register the above refer						
Please return all	l correspondence o	concerning this matter to the	following:					
	Jeffrey I. Lewis							
		N	ame of Person					
	Speech-languag	ge Specialist, P.L.L.C.						
	· · · · · · · · · · · · · · · · · · ·	Fi	irm/Company					
	2161 Country R	Load 540A, Suite 208						
			Address					
	Lakeland, FL 3	3813						
		City/S	tate and Zip Code					
	drjeff6@gmail.co							
		E-mail address: (to be used	d for future annual	report not	ification)			
For further info	rmation concerning	g this matter, please call:						
Jeffrey	I. Lewis		407 at (267-130	01			
	Name o	f Contact Person	Area Code	Day	time Telephone Number			
Division Registr P.O. B	ING ADDRESS: on of Corporations ration Section ox 6327 assee, FL 32314			Division of Registratic Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301			
	neck for the follow 5.00 Filing Fee	ing amount: \$\Bigsim \frac{1}{2} \frac{1}	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Speech-Language Spec	ialist, P.L.L.C. Company; must include "Limi			
(Name of Fore	ist, P. L.L.C. of Florida LL	ted Liability Company," "L.L.C.,"	or "ELC.")	
	ternate name adopted for the purpose of transacting		name must inclu	ide "Limited
Liability Company," "L.L.C,"				
2. North Carolina	3. 46-120			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicab	ile)	
4		****		
	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to de	prior to registration.) etermine penalty liability)		
5. 2161 County Road 540	A, Suite 208			
Lakeland, FL 33813				
0161 C D 1540	(Street Address of Principal Office			
6. 2161 County Road 540	A, Suite 208			Lakerung
Lakeland, FL 33813	•			En examples
	(Mailing Address)		- National Control	
7. Name and street address	ss of Florida registered agent: (P.O. Box NOT	acceptable)	ס אַב	i
Name:	Jeffrey I. Lewis, President		MES L	\bigcirc
Office Address:	2161 County Road 540A, Suite 208			
Office Address.	Lakeland	22912	<i>-</i>	
	(City)	, Florida 33813 (Zip code)		
Registered agent's accep	` •	(Zip code)		
designated in this applicate to complywith the provision to the complywith the provision to the comply with the province the complex to the c	gistered agent and to accept service of process tion, I hereby accept the appointment as registions of all statutes relative to the proper and comy position as registered agent.	ered agent and agree to act in	this capacity.	I further agree
	(Registered agent's sign	nature)		
8. The name, title or capa	acity and address of the person(s) who has/have	authority to manage is/are:		
•	1, 1080 Clearpointe Way, Lakeland, FL 33813	additionly to manage is are.		
				
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, duly au of which it is organized. (If the certificate is in a abmitted)	thenticated by the official having foreign language, a translation	ng custody of r	records in the rate under oath
	Signature of an authorizon	1 (Fes		
This document is executed	in accordance with section 605.0203 (1) (b), F	orida Statutes. I am aware that a	any false infor	mation
submitted in a document to	the Department of State constitutes a third deg	ree lelony as provided for in s.8	17.155, F.S.	
	Jeffrey I. Lewis, President			

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (PROFESSIONAL LIMITED LIABILITY COMPANY)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

SPEECH - LANGUAGE SPECIALIST, PLLC

is a professional limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 30th day of October, 2012, with a period of duration ending Perpetual.

I FURTHER certify that the said professional limited liability company's articles of formation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said professional limited liability company is not suspended for failure to comply with the provisions of any North Carolina Licensing Board; and that the said professional limited liability company has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 16th day of December, 2015.

Elaine J. Marshall

Secretary of State

Certification# 97789900-1 Reference# 12843699- Page: 1 of 1 Verify this certificate online at http://www.sos.nc.gov/verification